

OGDEN NEWELL & WELCH

RICHARD F. NEWELL
JAMES S. WELCH
JOHN T. BALLANTINE
JOSEPH C. OLDHAM
JAMES L. COORSSEN*
STEPHEN F. SCHUSTER
SCOTT T. WENDELSDOFF
JOHN G. TREITZ, JR.
WALTER LAPP SALES
ERNEST W. WILLIAMS

DAVID A. HARRIS□
GREGORY J. BUBALO** PSC
D. BRIAN RATTLETT
W. GREGORY KING
KENDRICK R. RIGGS†
ROBERT E. THIEMAN
JAMES B. MARTIN, JR.
LISA ANN VOGT
TURNER P. BERRY
LYNN H. WANGERIN

1200 ONE RIVERFRONT PLAZA
LOUISVILLE, KENTUCKY 40202-2973
(502) 582-1601
FAX: (502) 581-9564

JOHN WADE HENDRICKS
JAMES G. CAMPBELL
TERESA C. BUCHHEIT
SUSAN C. BYRRE
DOUGLAS C. BALLANTINE
LADY E. BOOTH††
TRACY S. PREWITT**
THOMAS E. RUTLEDGE□
SHARON A. MATTINGLY
JENNIFER J. HALL□□
ALLYSON K. STURGEON

SQUIRE R. OGDEN
1899-1984

ALSO ADMITTED:
*FLORIDA
**INDIANA
†VIRGINIA
††NEW YORK
□DISTRICT OF COLUMBIA
□□MASSACHUSETTS

July 18, 1994

Mr. Lawrence Noble, General Counsel
Federal Election Commission
999 E Street N.W.
Washington, D.C. 20463

RE: Keenan v. Simon, et al.

Dear Mr. Noble:

Enclosed are an original and three copies of Ms. Keenan's verified Complaint and Exhibits. Also enclosed are two additional file copies of the Complaint. Please return two file stamped copies of the Complaint to the address above.

Please ensure that our names and addresses appear on your mailing matrix for copies of all noticed material.

Sincerely,



Jennifer J. Hall, Esq.



Karen L. Stewart, Esq.
1167 East Broadway, Suite 300
Louisville, Kentucky 40204
(502) 589-2986

/Enclosures

Jul 20 12 49 PM '94
RECEIVED
FEDERAL ELECTION
COMMISSION
OFFICE OF GENERAL
COUNSEL

100760745007

JUL 20 2 08 PM '94

TO:

General Counsel
Federal Election Commission
999 E Street NW
Washington D.C. 20463

MUR 4012

Maureen Keenan

COMPLAINANT

vs.

Frank G. Simon, M.D.
Arthur A. Cerminara
Freedom's Heritage Forum
f/d/b/a Christian Coalition PAC,
f/d/b/a American Coalition for Traditional Values PAC
f/d/b/a Legislative Research PAC and
unknown individuals acting in concert
with the named Respondents

RESPONDENTS

VERIFIED COMPLAINT

* * * * *

Comes the Complainant, Maureen Keenan, by counsel, and states:

1. That her full name is Maureen Keenan and that her address is Louisville, Kentucky 40204.

2. That upon information and belief, Frank G. Simon, M.D. is a resident of Jefferson County, Kentucky, whose business address is Louisville, Kentucky 40207.

3. That upon information and belief, Arthur A. Cerminara, is a resident of Jefferson County, Kentucky, whose mailing address is P.O. Box 6689, Louisville, Kentucky 40206.

4. That upon personal knowledge, Freedom's Heritage Forum is a registered Political Action Committee with the Kentucky Registry of Election Finance ("K.R.E.F.") and with the Federal Election Commission ("F.E.C."). Freedom's Heritage Forum was previously

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registered with the K.R.E.F. as "Christian Coalition PAC," "American Coalition for Traditional Values PAC," and "Legislative Research PAC."

5. That upon information and belief, Freedom's Heritage Forum has the same mailing address as Frank G. Simon, M.D., which is P.O. Box 6689, Louisville, Kentucky 40206.

6. That pursuant to 2 U.S.C. § 437g and 11 C.F.R. § 111.1, et seq. the F.E.C. has jurisdiction over this matter.

7. That upon personal knowledge, the Respondents are individually and/or collectively a political committee within the meaning of 11 C.F.R. § 100.5 (a) because the Respondents received contributions as defined in 11 C.F.R. § 100.7, in excess of \$1000 in each calendar year of 1987, 1988, 1989, 1990, 1991, 1992, 1993 and 1994. Attached hereto and incorporated herein as collective Exhibit A are true copies the summary pages of Freedom's Heritage Forum's K.R.E.F. filings from 1987 through 1994 inclusive.

8. That upon personal knowledge, the Respondents the Respondents are individually and/or collectively a political committee within the meaning of 11 C.F.R. § 100.5 because the Respondents made expenditures, as defined in 11 C.F.R. §100.8 aggregating in excess of \$1000.00 during each calendar year of 1987, 1988, 1989, 1990, 1991, 1992, 1993 and 1994. See collective "Exhibit A " attached hereto.

9. That upon personal knowledge, the Respondent Freedom's Heritage Forum filed a statement of organization with the F.E.C. on or about March 3, 1994, as a committee supporting more than one Federal candidate. See "Exhibit B " attached hereto and

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incorporated herein.

10. That upon personal knowledge, the Respondents Frank G. Simon and Freedom's Heritage Forum distributed at least four tabloids, both by hand delivery and through the United States mail, supporting the Republican candidacy of Tim Hardy for United States Congress, Third Congressional District, Kentucky, and opposing Susan Stokes, a Republican candidate for the same nomination. Copies of the tabloids are attached hereto and incorporated herein as collective Exhibit C.

11. That the printing and distribution of the tabloids set forth in paragraph 10 constitutes a "contribution" as defined at 11 CFR § 100.7 and other applicable statutes and regulations.

12. That upon information and belief, Freedom's Heritage Forum made the following expenditures on behalf of the Republican Congressional candidate, Tim Hardy and against the Republican Congressional candidate, Susan Stokes, prior to and following the May 24, 1994 primary election:

5/4/94:	Ken Snyder Advertising -	\$1000.00	(s)
5/10/94:	Louisville Letter Service -	\$2500.00	(s)
5/11/94	Louisville Letter Service -	\$1400.00	(s)
5/11/94	Louisville Letter Service -	\$2990.57	(s)
5/11/94	Louisville Letter Service -	\$1353.83	(s)
5/11/94	Louisville Letter Service -	\$1670.51	(f)
5/17/94	Louisville Letter Service -	\$1500.00	(s)
5/17/94	Louisville Letter Service -	\$ 750.00	(f)
5/20/94	Kinko's Copies -	\$1116.71	(s)
5/20/94	Louisville Letter Service -	\$2400.00	(s)
5/31/94	Publishers Printing Co. -	\$2400.00	(s)
6/9/94	Louisville Letter Service -	\$5081.65	(f)
6/9/94	Louisville Letter Service -	\$2554.60	(s)

Total: \$26717.87

Attached hereto and incorporated herein as collective Exhibit D is a true copy of Freedom's Heritage Forum's K.R.E.F. report,

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file stamped July 5, 1994, and its F.E.C. report file stamped July 7, 1994. Contributions reported by the Respondent Freedom's Heritage Forum on its K.R.E.F. filing are marked with the initial "s"; additional or inconsistent amounts reported only on the Respondent's F.E.C. report are marked with the initial ("f").

13. That upon information and belief, the federal expenditures which differ from those reported on the Respondent's K.R.E.F. report are believed to be in addition to those expenditures reported on the individual reports.

14. That upon personal knowledge, since 1987, the year it began filing reports with the Kentucky Registry of Election Finance, Freedom's Heritage Forum has disclosed the name of only one contributor: Frank G. Simon. See "Exhibit A".

15. That upon personal knowledge, since 1987, Freedom's Heritage Forum has reported contributions totalling in excess of \$107,000.00.

16. That upon personal knowledge, Freedom's Heritage Forum failed to include with its July 7, 1994 report F.E.C. Schedule A, stating whether contributions in excess of \$200.00 were received from any single contributor during the reporting period.

Counts One through Four

17. Complainant realleges, incorporates and reiterates the allegations set forth in paragraphs 1-16 of this Complaint.

18. The four tabloids described in paragraph 10 of this Complaint do not contain the notice required by 11 CFR § 110.11(a)(1) concerning advertising, in that none of the four

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tabloids clearly state that the communications were either authorized or not authorized by the candidate, Tim Hardy. See "Exhibit C."

Count Five

19. Complainant realleges, incorporates and reiterates the allegations set forth in paragraphs 1-18 of this Complaint.

20. That F.E.C. regulations prohibit more than the sum of \$1000.00 being contributed by any person, other than a "multicandidate committee", per election cycle, pursuant to 2 U.S.C. § 441a (1) and 11 C.F.R. § 110.2.

21. That upon information and belief, Respondent Freedom's Heritage Forum is not a "multicandidate committee" as defined at 11 C.F.R. 100.5(e)(3), since it has filed no certification thereof with the F.E.C. pursuant to the requirements of 11 C.F.R. § 101.2(a)(3).

22. That upon information and belief, and based in part upon Respondents' lack of notice as set forth in Count One of this Complaint, and based in part upon Respondents' failure to certify and attest to the accuracy of the sums reported in its F.E.C. Schedule E, the contributions made by the Respondent Freedom's Heritage Forum on behalf of the candidate Tim Hardy were not "independent expenditures" as defined at 2 U.S.C. § 431 (17) and 11 C.F.R. § 109.1.

23. That upon information and belief, Respondent Freedom's Heritage Forum, in contributing the sum of \$26,717.87 on behalf of the Republican Congressional candidate Tim Hardy, violated and

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exceeded the applicable \$1000.00 contribution limit, pursuant to 2 U.S.C. § 441a(1) and 11 C.F.R. §110.1(c).

Count Six

24. Complainant realleges, incorporates and reiterates the allegations set forth in paragraphs 1-23 of this Complaint.

25. That upon personal knowledge, the Respondent Freedom's Heritage Forum characterized as "independent expenditures" all of the disbursements reported on its July 7, 1994 F.E.C. schedule E.

26. That upon personal knowledge the Respondent Freedom's Heritage Forum failed to certify and attest to the sums reported on its July 7, 1994 F.E.C. schedule E, as required by 11 C.F.R. §109.2(A)(v) and (b).

Counts Seven through Fifteen

27. Complainant realleges, incorporates and reiterates the allegations set forth in paragraphs 1 through 25 of this Complaint.

28. Upon information and belief, each of the four tabloids described in paragraph 10 of this Complaint were mailed or otherwise distributed by the Respondents after the 20th day prior to the primary election conducted on May 24, 1994.

29. Upon information and belief, the Respondent made the following contributions, all of which exceed the sum of \$1000.00 on behalf of Tim Hardy within 20 days of the May 24, 1994 election:

5/4/94	Ken Snyder Advertising	\$1000.00
5/10/94	Louisville Letter Service	\$2500.00
5/11/94	Louisville Letter Service	\$2990.57
5/11/94	Louisville Letter Service	\$1353.83
5/11/94	Louisville Letter Service	\$1400.00
5/11/94	Louisville Letter Service	\$1670.50

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5/17/94	Louisville Letter Service	\$1500.00
5/20/94	Louisville Letter Service	\$2400.00
5/20/94	Kinkos Copies	\$1116.71

30. That pursuant to 2 U.S.C. §434(c) and 11 C.F.R. §104.4, the Respondent Freedom's Heritage Forum is required to file a separate 24 hour report of each one of these nine expenditures.

31. Upon personal knowledge, the Respondent Freedom's Heritage Forum failed to file any of the nine required 24 hour reports with the F.E.C. and the Kentucky Secretary of State, Registry of Election Finance in accordance with 2 U.S.C. §434(c) and 11 C.F.R. § 104.4.

Count Sixteen

32. Complainant realleges, incorporates and reiterates the allegations set forth in paragraphs 1-30 of this Complaint.

33. Upon information and belief, Respondents failed to file reports and statements required by the Federal Election Commission's administrative regulations to be filed with the Kentucky Secretary of State or the K.R.E.F., as required by 11 C.F.R. §108.1, 11 C.F.R. § 108.3 and 11 C.F.R. §108.5.

WHEREFORE, Complainant respectfully demands:

a. That the F.E.C. order an investigation of all the facts and circumstances set forth in this Complaint to further determine the nature and extent of federal election law violations committed by the Respondents;

b. That the F.E.C. find reason to believe that the Respondents have committed violations of statutes or regulations involving Federal Election laws over which the Commission has

jurisdiction;

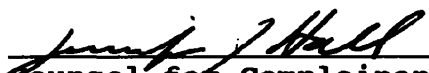
c. That the F.E.C. order the Respondents to fully comply with all provisions of the Federal Election Campaign Act of 1971, as amended;

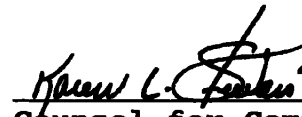
d. That the F.E.C. seek and impose penalties against the Respondents to the fullest extent permitted by law; and

e. For all other relief, legal and equitable, including authorization of a civil action for relief in an appropriate court of the United States.

Respectfully submitted,


Maureen Keenan, Complainant


Counsel for Complainant
Jennifer J. Hall, Esq.,
OGDEN, NEWELL & WELCH
1200 One Riverfront Plaza
Louisville, Kentucky 40202
(502) 582-1601


Counsel for Complainant
Karen L. Stewart, Esq.,
1167 East Broadway, Suite 300
Louisville, Kentucky 40204
(502) 589-2986

COMMONWEALTH OF KENTUCKY)
)
COUNTY OF JEFFERSON)
)

Subscribed, acknowledged and sworn to by Maureen Keenan, Complainant herein, before me on this the 18th day of July, 1994.

My commission expires: 11/12/94


NOTARY PUBLIC, STATE AT LARGE

280444205292

EXHIBIT A

28044203293

SENT BY:KREF

: 7-12-94 : 2:35PM :

5025735822-

5025408023:# 2

KREF 94006P

KENTUCKY REGISTRY OF ELECTION FINANCE
100 WALNUT STREET
FRANKFORT, KENTUCKY 40601
(502) 573-2225
FAX: (502) 573-9622



1. PAC Name Freedom's Heritage Forum
PAC Acronym (if applicable)

2. Ky. Registration Number 00144
(Account Number)

Jul 5 2 21 PM '94

OFFICE USE
PAGE. 00

PERMANENT COMMITTEE (PAC) ELECTION FINANCE STATEMENT COVER PAGE

3. Committee Mailing Address
PO Box 6689
Louisville, Ky. 40206
Area code/Phone No. 502/895-6263

4. Treasurer's Name and Mailing Address
Art Cerninara
PO Box 6689
Louisville, Ky. 40206
Area code/Phone No. 502/895-6263

5. This Statement Covers
From Apr 1 1994
To June 30 1994
Month Day Year

TYPE OF STATEMENT

- a. ☒ Quarterly
☐ Amendment
☐ Termination

NOTE: USE ONLY THOSE PAGES WITH
APPLY TO YOUR PAC.

If you have had no activity between report periods, complete Cover Page and Summary Page. Enter -0- in receipts, enter -0- in expenditures and ending balance from last report.

7. Verification: I certify that this Election Finance Statement is prepared with all reasonable diligence and to the best of my knowledge the contents are true, accurate and correct.

Chairman Frank G. Simon
Treasurer

Type or Print Name

Authorized Signature

Date 7 1 1994
Month Day Year

76750767082

SENT BY:KREF

7-12-94 : 2:35PM :

5025735822+

5025403023:# 3

SUMMARY PAGE

Committee Name Freedom's Heritage Forum Period From April 1, 1994 To June 30, 1994

RECEIPTS

COLUMN I THIS PERIOD	COLUMN II CUMULATIVE THIS YEAR
----------------------------	--------------------------------------

1. CONTRIBUTIONS: (Including all receipts from Fundraisers)

a. Receipts by check or written instrument (Schedule 1, Item 7a)	\$ <u>0.00</u>	
b. Other receipts (Schedule 1, Item 7b)	\$ <u>0.00</u>	
c. Receipts in currency (Number of people (135 people) (Individual cash contribution limit is \$50)	\$ <u>1,134.00</u>	
d. Anonymous (maximum \$50 per contribution)	\$ <u>0.00</u>	
e. Unitemized contributions (Number of people <u>502</u> (Contributions by check of \$100 or less)	\$ <u>10,000.00</u>	\$ <u>11,000.00</u> (\$1,000 max. per election)
2. TOTAL RECEIPTS	\$ <u>11,134.00</u>	\$ <u>11,134.00</u>

DISBURSEMENTS

3. TOTAL DISBURSEMENT (Schedule 2)	\$ <u>19,248.32</u>	
a. Disbursements not subject to 5% (Schedule 2, Item 7a)	\$ <u>7,434.98</u>	
b. Disbursements subject to 5% (Schedule 2, Item 7b)	\$ <u>11,813.34</u>	341.47
c. Line 3b x 5% fee - (after fee is calculated add line 3a, 3b, and 3c for total disbursements)	\$ <u>590.60</u>	
TOTAL DISBURSEMENT	\$ <u>27,057.50</u>	\$ <u>341.47</u>

BALANCE STATEMENT

4. Ending balance of last report (Enter -0- if no previous report)	\$ <u>19,685.66</u>	
5. Amount received during reporting period (Line 2, column I)	\$ <u>11,134.00</u>	
6. Sub-Total (Add lines 4 and 5)	\$ <u>30,819.66</u>	
7. Amount disbursed during reporting period (Line 3, column I)	\$ <u>27,057.50</u>	
8. ENDING BALANCE (Subtract Line 7 from Line 6)	\$ <u>3,762.16</u>	
9. Unpaid Bills or Other Obligations owed BY: (Schedule 5, Item 11)	\$ <u>0.00</u>	
10. Debts and Obligations owed TO: (Schedule 5, Item 11)	\$ <u>0.00</u>	

11. In-Kind Contributions Received (Schedule 3, Item 7)

THIS PERIOD	CUMULATIVE THIS YEAR
\$ <u>0.00</u>	\$ <u>0.00</u>

5025403023: # 4

LUCKY REGISTRY OF ELASTICITY FRANCE
148 VANDUUR STREET
FRANCOIS KENTUCKY 40001
DIN 973-3204
FAX 973-3204

**REWEAVED RECEIPTS
SCHEDULE 1**

1. Name of Committee Freedom's Heartfelt Forum	2. KY Registration Number (Account Number) 00144	3. This Statement Covers <table border="1"> <tr> <td>From</td> <td>4</td> <td>1</td> <td>9</td> </tr> <tr> <td>Month</td> <td>6</td> <td>Day</td> <td>30</td> </tr> <tr> <td>To:</td> <td>9</td> <td>Day</td> <td>9</td> </tr> <tr> <td></td> <td>Year</td> <td>Year</td> <td>Year</td> </tr> </table>	From	4	1	9	Month	6	Day	30	To:	9	Day	9		Year	Year	Year
From	4	1	9															
Month	6	Day	30															
To:	9	Day	9															
	Year	Year	Year															

4a. Name and Address from which received. Receipts in excess of \$ 100 must be itemized. All PAC receipts regardless of amount must be itemized.	4b. Marital Status	5. Type of contribution or Other Receipt	6. Date of Receipt	7. Contribution		8. Cumulative for year (Per Contributor)	9. Occupation and Employer of Contributor and Spouse if Contributor is self-employed. Occupation shall be specified for major business, social or political interest represented by contributor.
				7a. Contributions by Check or other instrument	7b. Other Receipts		
		Contributions: <input type="checkbox"/> Direct from a person or authorized entity <input type="checkbox"/> Fund-raiser <input type="checkbox"/> Mktg. (Specify) _____ <input type="checkbox"/> Transfer of Funds from Affiliated Committee					
		Contributions: <input type="checkbox"/> Direct from a person or authorized entity <input type="checkbox"/> Fund-raiser <input type="checkbox"/> Mktg. (Specify) _____ <input type="checkbox"/> Transfer of Funds from Affiliated Committee					
		Contributions: <input type="checkbox"/> Direct from a person or authorized entity <input type="checkbox"/> Fund-raiser <input type="checkbox"/> Mktg. (Specify) _____ <input type="checkbox"/> Transfer of Funds from Affiliated Committee					
		Contributions: <input type="checkbox"/> Direct from a person or authorized entity <input type="checkbox"/> Fund-raiser <input type="checkbox"/> Mktg. (Specify) _____ <input type="checkbox"/> Transfer of Funds from Affiliated Committee					
		Contributions: <input type="checkbox"/> Direct from a person or authorized entity <input type="checkbox"/> Fund-raiser <input type="checkbox"/> Mktg. (Specify) _____ <input type="checkbox"/> Transfer of Funds from Affiliated Committee					
		Contributions: <input type="checkbox"/> Direct from a person or authorized entity <input type="checkbox"/> Fund-raiser <input type="checkbox"/> Mktg. (Specify) _____ <input type="checkbox"/> Transfer of Funds from Affiliated Committee					

Subtotal This Page

Total This Period (only on last page of this Schedule)

12 '94 14:52

KENTUCKY RECEIPT OF ELECTION FINANCE

100 NEWPORT STREET
FRANKFORT, KENTUCKY 40601
(502) 373-2225
Fax: (502) 373-6222

DISBURSEMENTS

SCHEDULE 2

4. Name, Address and Occupation of person to whom paid
(If over \$25.00, disbursement must be made by check.)

5. Purpose (Be specific. \$25.00 or less show purpose, date and amount. Beneficiary of expenditure, if other than PRC, must be listed.)

6. Date

7a. Amount Disbursed (After subject to 5% Administrative Fee.)

7b. Amount Disbursed (After subject to 5% Administrative Fee.)

1. Name of Committee
Freedom's Heritage Forum

2. KY Registration Number
(Account Number)
00144

3. This Statement Covers
From 4/1/94 to 4/30/94

Jefferson County Treasurer Jefferson County Board of E-Comm 200 Barrett Ave Louisville, Ky. 40204	Jefferson County Street Book	4/1/94	35.-	
Kentucky Registry of Election Finance 150 Walnut St Frankfort, Ky. 40601-3240	Registration fee	4/4/94	200.-	
"	5% of expenditures (administrative fee)		32.61	
Office Building 1001 Breckinridge Ln Louisville, Ky. 40207	Copys paper	4/9/94	29.38	
Louisville Letter Service 4701 Pinewood Rd Louisville, Ky. 40218	mailing	4/11/94	2,300.-	
Legislative Research Commission Capital Building Frankfort, Ky. 40601	Two redistributed copys	4/12/94	9.-	
Mary Sawyer Louisville, Ky. 40211	Food for Volunteer Appreciation Banquet		450.-	

Subtotal This Page

Total This Period (only on last page of this Schedule)

Give this total on last page of Summary Page

Give this total on last page of Summary Page

SENT BY: KREF

7-12-94 : 2:37PM :

502573622-

5025408023: 5

Page 1 of 1

6825074082

SENT BY:KREF

: 7-12-94 : 2:37PM :

5025735522-

5025403023:# 0

KENTUCKY ACCOUNT OF ELECTION FINANCE

140 WALLACE STREET
FRANKFORT, KENTUCKY 40601
502 523-2222
FAX 502 523-3222

DISBURSEMENTS

SCHEDULE 2

1. Name of Committee Freedom's Healthy Future		2 KY Registration Number (Account Number) 00844		3. This Statement Covers From 4/1/94 To 6/30/94	
4. Name, Address and Occupation of person to whom paid (If over \$25.00, disbursement must be made by check.)	5. Purpose (Be specific. \$25.00 or less show purpose, date and amount. Beneficiary of expenditure, if other than POC, must be listed.)	6. Date	7a. Amount Disbursed (Net subject to 5% Administrative Fee.)	7b. Amount Disbursed (to 5% Administrative Fee.)	8. Page
FOR #25 719 Logan St. Louisville, Ky. 40217	Rental of "Swiss Hall"	4/20/94		329.00	90
Ken Snyder Advertising 2442 Tyler Ln Louisville, Ky. 40205	Consulting and layout of Tablets For Tim Hardy Against Shlos	5/4/94	1,000.00 Spent by Fed. POC for Fed. Candidate		91
Louisville Letter Service 4701 Pinewood Rd Louisville, Ky. 40208	Mailing for Hardy and against Shlos	5/10/94	2,500.00 Spent by Fed. POC for Fed. Candidate		92
"	Mailing	5/11/94	1,400.00 Spent by Fed. POC for Fed. Candidate		93
"	Mailing	5/10/94	2,990.57 Spent by Fed. POC for Fed. Candidate		94
"	Mailing	5/14/94	1,353.83 Spent by Fed. POC for Fed. Candidate		95
"	Mailing	5/17/94	1,500.00 Spent by Fed. POC for Fed. Candidate		96

Total This Period (only on last page of this Schedule)

Subtotal This Page

Enter this total
in line 2a of
Summary PageEnter this
total on line
2a of Summary Page

RECORDS DIVISION OF ELECTION FINANCE

100 WALNUT STREET
FRANKFORT, KENTUCKY 40601
(502) 573-2231
FAX: (502) 573-0022

DISBURSEMENTS

SCHEDULE 2

4. Name, Address and Occupation of person to whom paid (if over \$25.00, disbursement must be made by check.)	5. Purpose (Be specific. \$25.00 or less show purpose, date and amount. Beneficiary of expenditure, if other than P/C, must be listed)	6. Date	7a. Amount Disbursed (Not subject to 5% Administrative Fee.)	7b. Amount Disbursed (Not subject to 5% Administrative Fee.)
1. Name of Committee Freedom's Heritage Forum	2. KY Registration Number (Account Number) 00144	3. This Statement Covers From <u>4</u> <u>1</u> <u>94</u> To <u>30</u> <u>7</u> <u>94</u> Month Day Year		
Kinko's Copies 4121 Shelbyville Rd Louisville, Ky. 40207	Printing (For Hardy, against Stokes)	5/20/94	1116.71 Spent by Ed McC for Ed McC's date	
Louisville Letter Service 4701 Pinewood Rd Louisville, Ky. 40241	Mailing (")	5/20/94	2,900.- Spent by Ed McC for Ed McC's date	
Ozelle Limbaugh Louisville, Ky. 40241	clerical work	5/20/94		135.-
Publishers Printing Co. PO Box 37500 Louisville, Ky. 40233	Printing (")	5/31/94	2,400.- Spent by Ed McC for Ed McC's date	
Postmaster 1420 Cordine Ln Louisville, Ky. 40213	Postage Due	6/1/94		200.-
American Coach Travel PO Box 1362 New Albany, IN 47151-1362	Bus to Lexington for Republican state convention.			380.-
State Board of Election 140 Walnut St. Frankfort, Ky. 40601-3240	Labels			149.-

Schedule This Page

Total This Period (only on last page of this Schedule)

Spent by Ed McC for Ed McC's date	Spent by Ed McC for Ed McC's date
2,400.-	2,400.-
1,116.71	1,116.71
2,900.-	2,900.-
135.-	135.-
200.-	200.-
380.-	380.-
149.-	149.-

Spent by Ed
McC for Ed
McC's date

5025403023: # 8

SCHEDULE 2

Shapherdsmith, Ky. 40165

5

2,5,7

**Easton
Knappe &
Co. of Somerset**

KREF 94-006:P

KENTUCKY REGISTRY OF ELECTION FINANCE

140 WALNUT STREET
FRANKFORT, KENTUCKY 40601
(502) 573-2226
FAX # (502) 573-5622

OFFICE USE ONLY

AM

FEB 6 12 40 PM '94

PERMANENT COMMITTEE
(PAC)
ELECTION FINANCE STATEMENT
COVER PAGE

1. PAC Name *Freedom's Heritage Forum*
PAC Acronym (if applicable)

2. Ky. Registration Number *00144*
(Account Number)

3. Committee Mailing Address
*PO Box 6689
Louisville, Ky. 40206
Area code/Phone No. 502/895-6263*

4. Treasurer's Name and Mailing Address
*Art Cerninara
PO Box 6689
Louisville, Ky. 40206
Area code/Phone No. 502/895-6263*

5. This Statement Covers
From *12/31/93* To *3/31/94*
Month Day Year
Month Day Year

TYPE OF STATEMENT

6. ☒ Quarterly
☐ Amendment
☐ Termination

NOTE: USE ONLY THOSE PAGES WHICH
APPLY TO YOUR PAC.

If you have had no activity between reporting
periods, complete Cover Page and Summary
Page. Enter -0- in receipts, enter -0- in expendi-
tures and ending balance from last report.

7. Verification: I certify that this Election Finance Statement is prepared with all reasonable diligence and to the best of my knowledge the contents are true, accurate and complete.

Chairman/for
Treasurer

Frank G. Simon

Type or Print Name

Authorized Signature

Date

Month

Day

Year

10350274082

SUMMARY PAGE

Committee Name Freedom's Heritage Forum Period From 12/31/93 To 3/31/94

RECEIPTS

COLUMN I THIS PERIOD	COLUMN II CUMULATIVE THIS YEAR
----------------------------	--------------------------------------

1. CONTRIBUTIONS: (Including all receipts from Fundraisers)

a. Itemized by check or written instrument (Schedule 1, Item 7a)	\$ <u>0.00</u>	
b. Other receipts (Schedule 1, Item 7b)	\$ <u>0.00</u>	
c. Receipts in currency (Number of people (Individual cash contribution limit is \$50))	\$ <u>0.00</u>	
d. Anonymous (maximum \$50 per contribution)	\$ <u>2,251.00</u>	\$ <u>2,251.00</u>
e. Unitemized contributions (Number of people <u>100</u>) (Contributions by check of \$100 or less)		\$ <u>0.00</u> (\$1,000 max. per election)
2. TOTAL RECEIPTS	\$ <u>2,251.00</u>	\$ <u>2,251.00</u>

DISBURSEMENTS

3. TOTAL DISBURSEMENT (Schedule 2)		
a. Disbursements not subject to 5% (Schedule 2, Item 7a)	\$ <u>243.30</u>	
b. Disbursements subject to 5% (Schedule 2, Item 7b)	\$ <u>652.36</u>	
c. Line 3b x 5% fee - (after fee is calculated add line 3a, 3b, and 3c for total disbursements)	\$ <u>32.62</u>	
TOTAL DISBURSEMENT	\$ <u>935.66</u>	\$ <u>935.66</u>

(32.62 = 5% fee to include in reporting)

BALANCE STATEMENT

4. Ending balance of last report (Enter -0- if no previous report)	\$ <u>18,370.32</u>	
5. Amount received during reporting period (Line 2, column I)	\$ <u>2,251.00</u>	
6. Sub-Total (Add lines 4 and 5)	\$ <u>20,621.32</u>	
7. Amount disbursed during reporting period (Line 3, column I)	\$ <u>935.66</u>	
8. ENDING BALANCE (Subtract Line 7 from Line 6)	\$ <u>19,685.66</u>	
9. Unpaid Bills or Other Obligations owed BY: (Schedule 5, Item 11)	\$ <u>0.00</u>	
10. Debts and Obligations owed TO: (Schedule 5, Item 11)	\$ <u>0.00</u>	

THIS PERIOD	CUMULATIVE THIS YEAR
----------------	-------------------------

11. In-kind Contributions Received (Schedule 3, Item 7) \$ 0.00

20250277082

KENTUCKY RECEIPT OF ELECTION FINANCE
140 WALL STREET
FRANKFORT, KENTUCKY 40601
(502) 572-2225
FAX (502) 572-5822

ITEMIZED RECEIPTS

SCHEDULE 1

1. Name of Committee <i>Freedom's Heritage Forum</i>		2. KY Registration Number (Account Number) <i>00144</i>		3. This Statement Covers From <i>12/31/93</i> to <i>3/31/94</i> Month Day Year		
4a. Name and Address from whom received. Receipts in excess of \$ 100 must be itemized. All PAC receipts regardless of amount must be itemized.	4b. Marital Status	5. Type of contribution or Other Receipt	6. Date of Receipt		8. Cumulative for year (Per Contributor)	9. Occupation and Employer of Contributor and Spouse of Contributor (If self-employed, name and address of business) (Occupation shall be specific. OR Major Business, social or political interest represented by committee).
			7a. Contributions by Check or Written Instrument	7b. Other Receipts		
		Contributors: <input type="checkbox"/> Direct from a person or authorized entity <input type="checkbox"/> Fundraiser <input type="checkbox"/> Elec. (Specify) _____ <input type="checkbox"/> Transfer of Funds from Affiliated Committee				
		Contributors: <input type="checkbox"/> Direct from a person or authorized entity <input type="checkbox"/> Fundraiser <input type="checkbox"/> Elec. (Specify) _____ <input type="checkbox"/> Transfer of Funds from Affiliated Committee				
		Contributors: <input type="checkbox"/> Direct from a person or authorized entity <input type="checkbox"/> Fundraiser <input type="checkbox"/> Elec. (Specify) _____ <input type="checkbox"/> Transfer of Funds from Affiliated Committee				
		Contributors: <input type="checkbox"/> Direct from a person or authorized entity <input type="checkbox"/> Fundraiser <input type="checkbox"/> Elec. (Specify) _____ <input type="checkbox"/> Transfer of Funds from Affiliated Committee				
		Contributors: <input type="checkbox"/> Direct from a person or authorized entity <input type="checkbox"/> Fundraiser <input type="checkbox"/> Elec. (Specify) _____ <input type="checkbox"/> Transfer of Funds from Affiliated Committee				
		Contributors: <input type="checkbox"/> Direct from a person or authorized entity <input type="checkbox"/> Fundraiser <input type="checkbox"/> Elec. (Specify) _____ <input type="checkbox"/> Transfer of Funds from Affiliated Committee				

Total This Period (only on last page of this Schedule)

Subtotal This Page

Enter this amount on the last Summary Page	Enter this total on the first Summary Page
0000	0000

(502) 573-2228
FAX • (502) 573-5622

SCHEDULE 2

1. Name of Committee Freedom's Heritage Forum	2. KY Registration Number (Account Number) 00144	3. This Statement Covers From 12/31/93 To 3/31/94 Month Day Year
--	--	---

4. Name, Address and Occupation of person to whom paid <small>(if over \$25.00, disbursement must be made by check.)</small>	5. Purpose (Be specific, \$25.00 or less show purpose, date and amount; Beneficiary if expenditure, it other than PAC, must be listed)	6 Date	7a Amount Disbursed (Not subject to 5% Administrative Fee.)	7b Amount Disbursed (Subject to 5% Administra- tive Fee)
Ky State Treasurer Franklin, Ky. 40601	Administration Fee for PAC (5% of expenditures paid to Registry)	1/4/94	\$83.30	—
Louisville Letter Service 4701 Pinewood Rd. Louisville, KY 40215	Mailing Expense	3/11/94		\$652.36
Subtotal This Page			\$83.30	\$652.36
Total This Period (only on last page of this Schedule)			\$63.30	\$652.36

KREF B2-C06

KENTUCKY REGISTRY OF ELECTION FINANCE

140 WALNUT STREET
FRANKFORT, KENTUCKY 40601
(502) 564-2226
FAX # (502) 564-5622

OFFICE USE ONLY

ELECTION FINANCE STATEMENT
COVER PAGE

1. Candidate Name Social Security No. Office Sought/Dist. No. County of Residence Political Party		2. Committee Name Supporting Office Sought/Dist. No.	
3. Candidate/Committee Mailing Address PO Box 6684 Louisville, Ky 40206 Area Code/Phone No. (502) 645-6263		4. Treasurer's Name and Mailing Address Art. Cermiera PO Box 6684 Louisville, Ky. 40206 Area Code/Phone No. (502) 645-6263	
5. This Statement Covers From 10/1/93 To 12/31/93		6. TYPE OF STATEMENT a. <input type="checkbox"/> Pre-election (Quarterly Preceding - Future Year) b. <input type="checkbox"/> Pre-election (32nd day preceding) c. <input type="checkbox"/> Pre-election (12th day preceding) d. <input type="checkbox"/> Post Election (30th day following) e. <input type="checkbox"/> Post Election Supplemental (60th day following) f. <input type="checkbox"/> Semi-annual Supplemental (candidate in previous election) g. <input type="checkbox"/> Executive Committees of Political Parties h. <input checked="" type="checkbox"/> Quarterly Permanent Committees i. <input type="checkbox"/> Termination j. <input type="checkbox"/> Amendment- Check one of the items above to indicate which statement is being amended.	
7. Verification: I certify that this Election Finance Statement is prepared with all reasonable diligence and to the best of my knowledge the contents are true, accurate and complete.		Date of Election Month Day Year 10 1 93	

NOTE: USE ONLY THOSE PAGES WHICH
APPLY TO YOUR INDIVIDUAL CAMPAIGN.

If you have had no activity between reporting
periods, complete Cover Page and Summary
Page. Enter -0- in receipts, enter -0- in expen-
ditures and ending balance from last report.

President
Candidate
Treasurer

Frank A. Simon, M.D.
Type or Print Name

Donald H. Heron
Authorized Signature

Date 1/1/94
Month Day Year

SUMMARY PAGE

Candidate/Committee Freedom's Heritage Forum Period From 10/1/93 To 12/3/93

RECEIPTS

1. CONTRIBUTIONS: (Including all receipts from Fundraisers)

- a. Itemized by check or written instrument (Schedule 1, Item 7a) \$ 0
 b. Other receipts (Schedule 1, Item 7b) + \$ 0
 c. Receipts in currency (Number of people 1) + \$ 0
 (Individual cash contribution limit is \$100)
 d. Unitemized contributions (Number of people 205) + \$ 4,668.50
 (Contributions by check of \$300 or less) = \$ 4,668.50

2. TOTAL RECEIPTS

\$ 4,668.50

DISBURSEMENTS

3. TOTAL DISBURSEMENTS (Schedule 2, Item 7)

\$ 5,665.99

BALANCE STATEMENT

4. Ending balance of last report (Enter -0- if no previous report) \$ 19,367.81
 5. Amount received during reporting period (Line 2, Column 1) + \$ 4,668.50
 6. Sub-Total (Add lines 4 and 5) = \$ 24,036.31
 7. Amount disbursed during reporting period (Line 3, Column 1) - \$ 5,665.99
 8. ENDING BALANCE (Subtract Line 7 from Line 6) = \$ 18,370.32

9. Unpaid Bills or Other Obligations owed BY: (Schedule 5, Item 11) \$ 0
 10. Debts and Obligations owed TO: (Schedule 5, Item 11) \$ 0

THIS PERIOD	CUMULATIVE THIS ELECTION
\$ <u> 0 </u>	\$ <u> 0 </u>

11. In-Kind Contributions Received (Schedule 3, Item 7)
 12. Fund Raisers (See attached Schedule)

90350277082

KENTUCKY REGISTRY OF ELECTION FINANCE

240 WALNUT STREET
FRANKFORT, KENTUCKY 40601
502/224-1136

15021 564-2774
FAX / 15021 564-5622

ITEMIZED RECEIPTS

SCHEDULE 1

1. Name of Candidate	N/A																
2. Committee Name	Freedom's Hero Forum																
3. This Statement Covers	<table border="0"> <tr> <td>From</td> <td>10</td> <td>1</td> <td>93</td> </tr> <tr> <td></td> <td>Month</td> <td>Day</td> <td>Year</td> </tr> <tr> <td>To</td> <td>12</td> <td>31</td> <td>93</td> </tr> <tr> <td></td> <td>Month</td> <td>Day</td> <td>Year</td> </tr> </table>	From	10	1	93		Month	Day	Year	To	12	31	93		Month	Day	Year
From	10	1	93														
	Month	Day	Year														
To	12	31	93														
	Month	Day	Year														

4a. Name and Address from whom received. Enter age if not 18 by date of General Election.	4b. AGE	5. Type of Contribution or Other Receipt	6. Date of Receipt	AMOUNT		8. Cumulative for election	9. Occupation and Employer of Contributor and Spouse of Contributor. (If self-employed, name under which doing business) Occupation shall be specific
				7a. Contributions by Check or Written Instrument	7b. Other Receipts		
		Contributions: <input type="checkbox"/> Candidate Direct <input type="checkbox"/> Candidate Loan <input type="checkbox"/> Direct from a person or authorized entity Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Fundraiser <input type="checkbox"/> Misc. (Specify) _____					
		Contributions: <input type="checkbox"/> Candidate Direct <input type="checkbox"/> Candidate Loan <input type="checkbox"/> Direct from a person or authorized entity Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Fundraiser <input type="checkbox"/> Misc. (Specify) _____					
		Contributions: <input type="checkbox"/> Candidate Direct <input type="checkbox"/> Candidate Loan <input type="checkbox"/> Direct from a person or authorized entity Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Fundraiser <input type="checkbox"/> Misc. (Specify) _____					
		Contributions: <input type="checkbox"/> Candidate Direct <input type="checkbox"/> Candidate Loan <input type="checkbox"/> Direct from a person or authorized entity Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Fundraiser <input type="checkbox"/> Misc. (Specify) _____					
		Contributions: <input type="checkbox"/> Candidate Direct <input type="checkbox"/> Candidate Loan <input type="checkbox"/> Direct from a person or authorized entity Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Fundraiser <input type="checkbox"/> Misc. (Specify) _____					
		Contributions: <input type="checkbox"/> Candidate Direct <input type="checkbox"/> Candidate Loan <input type="checkbox"/> Direct from a person or authorized entity Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Fundraiser <input type="checkbox"/> Misc. (Specify) _____					

Subtotal This Page:

Total This Period (only on last page of this schedule):

KENTUCKY REGISTRY OF ELECTION FINANCE

140 WALNUT STREET
FRANKFORT, KENTUCKY 40601
5021 564-1275
FAX # 5021 564-5612

DISBURSEMENTS

SCHEDULE 2

4. Name, Address and Occupation of person to whom paid (if over \$25.00, disbursement must be made by check. Persons transporting voters to the polls must be paid by check and each payment must be itemized to include name and address of person to whom made.)	1. Name of Candidate	2. Committee Name	3. This Statement Covers	6. Date	7. Amount Disbursed
Registry of Election Finance 240 Walnut St. Frankfort, Ky. 40601	n/a	Freedom's Heritage Fund	From 10/1/93 To 12/31/93 Month Day Year	10/4/93	128.07
Louisville Letter Service 4701 Pinewood Rd Louisville, Ky. 40218 (A letter mailing and printing service)				10/22/93	400.-
Mayor for Alderman Campaign Fund 1122 Rammers Ave Louisville, Ky. (Alderman)				2/6/93	299.-
Publishers Printing Co Shepherdsville, Ky. (Printers)				11/22/93	3,000.-
Louisville Letter Service 4701 Pinewood Rd Louisville, Ky. 40218 (A letter mailing and printing service)				12/4/93	1,838.92

Subtotal This Page

5,665.94

Total This Period (only on last page of this schedule)

5,665.94

Enter this total on line 3 of Summary

KENTUCKY REGISTRY OF ELECTION FINANCE
140 WALNUT STREET
FRANCORT, KENTUCKY 40601
15021 564 7224
FAX # 15021 844 5927

IN-KIND CONTRIBUTIONS

1. Name of Candidate	N/A																
2. Committee Name	Freedom's Heritage Forum																
3. This Statement Covers	<table border="0"> <tr> <td>From</td> <td>10</td> <td>1</td> <td>93</td> </tr> <tr> <td></td> <td>March</td> <td>Day</td> <td>Year</td> </tr> <tr> <td>To</td> <td>12</td> <td>31</td> <td>92</td> </tr> <tr> <td></td> <td>Month</td> <td>Day</td> <td>Year</td> </tr> </table>	From	10	1	93		March	Day	Year	To	12	31	92		Month	Day	Year
From	10	1	93														
	March	Day	Year														
To	12	31	92														
	Month	Day	Year														

[illegible]

Subtotal This Page

Turn In This Period Only on last page of this schedule.

James (The Butch
on June 11 of
Sunday Fight

KENTUCKY REGISTRY OF ELECTION FINANCE
140 WALNUT STREET
FRANKFORT, KENTUCKY 40601
(502) 564-2226
FAX # (502) 564-5622

ELECTION FINANCE STATEMENT

COVER PAGE

1. Candidate Name
Social Security No.
Office Sought/Dist. No.
County of Residence
Political Party

N/A



2. Committee Name *Freedom's Heritage Forum*
Supporting *various candidates*
Office Sought/Dist. No. *N/A #00149*

3. Candidate/Committee Mailing Address
*PO Box 6684
Louisville, Ky. 40206
Area Code/Phone No. (502) 845-6263*

4. Treasurer's Name and Mailing Address
*Art Carmine
PO Box 6684
Louisville, Ky. 40206
Area Code/Phone No. (502) 845-6263*

5. This Statement Covers
From July 1, '93
To Sept. 30, '93

TYPE OF STATEMENT

- 6a. ☐ Pre-election (Quarterly Preceding - Future Year)
b. ☐ Pre-election (32nd day preceding)
c. ☐ Pre-election (12th day preceding)
d. ☐ Post Election (30th day following)
e. ☐ Post Election Supplemental (60th day following)
f. ☐ Semi-annual Supplemental (candidate in previous election)
g. ☐ Executive Committees of Political Parties
h. ☒ Quarterly (Permanent Committees)
i. ☐ Termination
j. ☐ Amendment- Check one of the items above to indicate which statement is being amended.

Pre-election, Post Election or
Supplemental Statement relates to:

☐ Primary ☐ General ☐ Special

Date of Election

Month _____ Day _____ Year _____

NOTE: USE ONLY THOSE PAGES WHICH
APPLY TO YOUR INDIVIDUAL CAMPAIGN.

If you have had no activity between reporting
periods, complete Cover Page and Summary
Page. Enter -0- in receipts, enter -0- in expen-
ditures and ending balance from last report.

7. Verification: I certify that this Election Finance Statement is prepared with all reasonable diligence and to the best of my knowledge the contents are true, accurate and complete.

President
Candidate/
Treasurer Frank G. Simon, M.D.
Type or Print Name

Frank G. Simon
Authorized Signature Date 10/4/93
Month Day Year

SUMMARY PAGE

Candidate/Committee Freedom's Heritage Forum Period From July 1, '93 To Sept 30 '93

RECEIPTS

COLUMN I
THIS
PERIOD
COLUMN II
CUMULATIVE
THIS ELECTION

1. CONTRIBUTIONS: (Including all receipts from Fundraisers)
 - a. Itemized by check or written instrument (Schedule 1, Item 7a) \$ -0-
 - b. Other receipts (Schedule 1, Item 7b) + \$ 56.-
 - c. Receipts in currency (Number of people 12)
(Individual cash contribution limit is \$100) + \$ 6,426.86
 - d. Unitemized contributions (Number of people 291)
(Contributions by check of \$300 or less) + \$ 6,482.86

2. TOTAL RECEIPTS

= \$ 6,482.86

DISBURSEMENTS

3. TOTAL DISBURSEMENTS (Schedule 2, Item 7)

\$ 2,561.36

BALANCE STATEMENT

4. Ending balance of last report (Enter -0- if no previous report) \$ 15,446.31
5. Amount received during reporting period (Line 2, Column 1) + \$ 6,482.86
6. SubTotal (Add lines 4 and 5) = \$ 21,929.17
7. Amount disbursed during reporting period (Line 3, Column 1) - \$ 2,561.36
8. ENDING BALANCE (Subtract Line 7 from Line 6) = \$ 19,367.81

9. Unpaid Bills or Other Obligations owed BY: (Schedule 5, Item 11) \$ -0-
10. Debts and Obligations owed TO: (Schedule 5, Item 11) \$ -0-

THIS
PERIOD
CUMULATIVE
THIS ELECTION

\$ -0-

\$ 19,367.81

11. In-kind Contributions Received (Schedule 3, Item 7)
12. Fund Raisers (See attached Schedule)

TTT02P082

**140 WALNUT STREET
FRANKFORT, KENTUCKY 40601
(502) 564-2226
FAX / (502) 564-5622**

4a. Name and Address from whom received. Enter age if not 18 by date of General Election.

KENTUCKY REGISTRY OF ELECTION FINANCE 140 WALNUT STREET FRANKFORT, KENTUCKY 40601 (502) 564-3225 FAX # (502) 564-5622				1. Name of Candidate N/A		2. Committee Name Freedom's Heritage Forum		3. This Statement Covers From <u>July</u> 1, '93 Month Day Year To <u>Sept</u> 30, '93 Month Day Year	
ITEMIZED RECEIPTS SCHEDULE 1				AMOUNT		8. Cumulative for election		9. Occupation and Employer of Contributor and Spouse of Contributor. If self-employed, name under which doing business. Occupation shall be specific.	
4a. Name and Address from whom received. Enter age if not 18 by date of General Election.	4b. AGE	5. Type of Contribution or Other Receipt	6. Date of Receipt	7a. Contributions by Check or Written Instrument	7b. Other Receipts				
		Contributions: <input type="checkbox"/> Candidate Direct <input type="checkbox"/> Candidate Loan <input type="checkbox"/> Direct from a person or authorized entity Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Fundraiser <input type="checkbox"/> Misc. (Specify) _____							
		Contributions: <input type="checkbox"/> Candidate Direct <input type="checkbox"/> Candidate Loan <input type="checkbox"/> Direct from a person or authorized entity Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Fundraiser <input type="checkbox"/> Misc. (Specify) _____							
		Contributions: <input type="checkbox"/> Candidate Direct <input type="checkbox"/> Candidate Loan <input type="checkbox"/> Direct from a person or authorized entity Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Fundraiser <input type="checkbox"/> Misc. (Specify) _____							
		Contributions: <input type="checkbox"/> Candidate Direct <input type="checkbox"/> Candidate Loan <input type="checkbox"/> Direct from a person or authorized entity Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Fundraiser <input type="checkbox"/> Misc. (Specify) _____							
		Contributions: <input type="checkbox"/> Candidate Direct <input type="checkbox"/> Candidate Loan <input type="checkbox"/> Direct from a person or authorized entity Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Fundraiser <input type="checkbox"/> Misc. (Specify) _____							
		Contributions: <input type="checkbox"/> Candidate Direct <input type="checkbox"/> Candidate Loan <input type="checkbox"/> Direct from a person or authorized entity Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Fundraiser <input type="checkbox"/> Misc. (Specify) _____							
		Contributions: <input type="checkbox"/> Candidate Direct <input type="checkbox"/> Candidate Loan <input type="checkbox"/> Direct from a person or authorized entity Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Fundraiser <input type="checkbox"/> Misc. (Specify) _____							
		Contributions: <input type="checkbox"/> Candidate Direct <input type="checkbox"/> Candidate Loan <input type="checkbox"/> Direct from a person or authorized entity Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Fundraiser <input type="checkbox"/> Misc. (Specify) _____							
		Contributions: <input type="checkbox"/> Candidate Direct <input type="checkbox"/> Candidate Loan <input type="checkbox"/> Direct from a person or authorized entity Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Fundraiser <input type="checkbox"/> Misc. (Specify) _____							
		Contributions: <input type="checkbox"/> Candidate Direct <input type="checkbox"/> Candidate Loan <input type="checkbox"/> Direct from a person or authorized entity Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Fundraiser <input type="checkbox"/> Misc. (Specify) _____							
		Contributions: <input type="checkbox"/> Candidate Direct <input type="checkbox"/> Candidate Loan <input type="checkbox"/> Direct from a person or authorized entity Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Fundraiser <input type="checkbox"/> Misc. (Specify) _____							
		Contributions: <input type="checkbox"/> Candidate Direct <input type="checkbox"/> Candidate Loan <input type="checkbox"/> Direct from a person or authorized entity Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Fundraiser <input type="checkbox"/> Misc. (Specify) _____							
		Contributions: <input type="checkbox"/> Candidate Direct <input type="checkbox"/> Candidate Loan <input type="checkbox"/> Direct from a person or authorized entity Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Fundraiser <input type="checkbox"/> Misc. (Specify) _____							
		Contributions: <input type="checkbox"/> Candidate Direct <input type="checkbox"/> Candidate Loan <input type="checkbox"/> Direct from a person or authorized entity Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Fundraiser <input type="checkbox"/> Misc. (Specify) _____							
		Contributions: <input type="checkbox"/> Candidate Direct <input type="checkbox"/> Candidate Loan <input type="checkbox"/> Direct from a person or authorized entity Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Fundraiser <input type="checkbox"/> Misc. (Specify) _____							
		Contributions: <input type="checkbox"/> Candidate Direct <input type="checkbox"/> Candidate Loan <input type="checkbox"/> Direct from a person or authorized entity Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Fundraiser <input type="checkbox"/> Misc. (Specify) _____							
		Contributions: <input type="checkbox"/> Candidate Direct <input type="checkbox"/> Candidate Loan <input type="checkbox"/> Direct from a person or authorized entity Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Fundraiser <input type="checkbox"/> Misc. (Specify) _____							
		Contributions: <input type="checkbox"/> Candidate Direct <input type="checkbox"/> Candidate Loan <input type="checkbox"/> Direct from a person or authorized entity Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Fundraiser <input type="checkbox"/> Misc. (Specify) _____							
		Contributions: <input type="checkbox"/> Candidate Direct <input type="checkbox"/> Candidate Loan <input type="checkbox"/> Direct from a person or authorized entity Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Fundraiser <input type="checkbox"/> Misc. (Specify) _____							
		Contributions: <input type="checkbox"/> Candidate Direct <input type="checkbox"/> Candidate Loan <input type="checkbox"/> Direct from a person or authorized entity Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Fundraiser <input type="checkbox"/> Misc. (Specify) _____							
		Contributions: <input type="checkbox"/> Candidate Direct <input type="checkbox"/> Candidate Loan <input type="checkbox"/> Direct from a person or authorized entity Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Fundraiser <input type="checkbox"/> Misc. (Specify) _____							
		Contributions: <input type="checkbox"/> Candidate Direct <input type="checkbox"/> Candidate Loan <input type="checkbox"/> Direct from a person or authorized entity Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Fundraiser <input type="checkbox"/> Misc. (Specify) _____							
		Contributions: <input type="checkbox"/> Candidate Direct <input type="checkbox"/> Candidate Loan <input type="checkbox"/> Direct from a person or authorized entity Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Fundraiser <input type="checkbox"/> Misc. (Specify) _____							
		Contributions: <input type="checkbox"/> Candidate Direct <input type="checkbox"/> Candidate Loan <input type="checkbox"/> Direct from a person or authorized entity Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Fundraiser <input type="checkbox"/> Misc. (Specify) _____							
		Contributions: <input type="checkbox"/> Candidate Direct <input type="checkbox"/> Candidate Loan <input type="checkbox"/> Direct from a person or authorized entity Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Fundraiser <input type="checkbox"/> Misc. (Specify) _____							
		Contributions: <input type="checkbox"/> Candidate Direct <input type="checkbox"/> Candidate Loan <input type="checkbox"/> Direct from a person or authorized entity Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Fundraiser <input type="checkbox"/> Misc. (Specify) _____							
		Contributions: <input type="checkbox"/> Candidate Direct <input type="checkbox"/> Candidate Loan <input type="checkbox"/> Direct from a person or authorized entity Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Fundraiser <input type="checkbox"/> Misc. (Specify) _____							
		Contributions: <input type="checkbox"/> Candidate Direct <input type="checkbox"/> Candidate Loan <input type="checkbox"/> Direct from a person or authorized entity Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Fundraiser <input type="checkbox"/> Misc. (Specify) _____							
		Contributions: <input type="checkbox"/> Candidate Direct <input type="checkbox"/> Candidate Loan <input type="checkbox"/> Direct from a person or authorized entity Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Fundraiser <input type="checkbox"/> Misc. (Specify) _____							
	</								

KENTUCKY REGISTRY OF ELECTION FINANCE
140 WALNUT STREET
FRANKFORT, KENTUCKY 40601
(502) 564-2228
FAX # (502) 564-5832

DISBURSEMENTS
SCHEDULE 2

KENTUCKY REGISTRY OF ELECTION FINANCE 140 WALNUT STREET FRANKFORT, KENTUCKY 40601 18021 864-2226 FAX # 18021 864-8622		1. Name of Candidate 11/A		2. Committee Name Freedom's Heritage Forum		3. This Statement Covers From July 1 93 To Sept 30 93 Month Day Year			
DISBURSEMENTS SCHEDULE 2		4. Name, Address and Occupation of person to whom paid (if over \$25.00, disbursement must be made by check. Persons transporting voters to the polls must be paid by check and each payment must be itemized to include name and address of person to whom made)		5. Purpose (be specific, \$25.00 or less show purpose, date and amount)		6. Date		7. Amount Disbursed	
Louisville Letter Service 4701 Pinewood Rd Louisville, Ky. 40218		Print and put out mailing		7/22/93		2,069.97			
Kentucky State Treasurer Frankfort, Ky.		5% administrative fee for PAC, due quarterly.		9/1/93		391.39			
Vince Heuser PO Box 35111 Louisville, Ky. 40233		Attorney fee		6/18/93		100.-			

Subtotal This Page

2,561.36

Total This Period (only on last page of this schedule)

2,561.36

KENTUCKY REGISTRY OF ELECTION FINANCE
140 WALNUT STREET
FRANKFORT, KENTUCKY 40601
(502) 564-2226
FAX # (502) 564-8622

OFFICE USE ONLY

ELECTION FINANCE STATEMENT COVER PAGE

1. Candidate Name
Social Security No. } N/A
Office Sough/Dist. No. }
County of Residence
Political Party

2. Committee Name *Frederick's Heritage Farm*
Supporting Various Candidates
Office Sough/Dist. No. *N/A*

60144

3. Candidate/Committee Mailing Address
*PO Box 6684
Louisville, Ky. 40206
Area Code/Phone No. (502) 845-6263*

4. Treasurer's Name and Mailing Address
*Art. Cernigera
PO Box 6684
Louisville, Ky. 40206
Area Code/Phone No. (502) 845-6263*

5. This Statement Covers
From 4 1 93
Month Day Year
To 6 30 93
Month Day Year

TYPE OF STATEMENT

- 6a. ☐ Pre-election (Quarterly Preceding - Future Year)
- b. ☐ Pre-election (32nd day preceding)
- c. ☐ Pre-election (12th day preceding)
- d. ☐ Post Election (30th day following)
- e. ☐ Post Election Supplemental (60th day following)
- f. ☐ Semi-annual Supplemental (candidate in previous election)
- g. ☐ Executive Committees of Political Parties
- h. ☒ Quarterly (Permanent Committees)
- i. ☐ Termination Month Day Year
- j. ☐ Amendment: Check one of the items above to indicate which statement is being amended.

Pre-election, Post Election or
Supplemental Statement relates to:☐ Primary ☐ General ☐ Special

Date of Election

Month Day Year

NOTE: USE ONLY THOSE PAGES WHICH
APPLY TO YOUR INDIVIDUAL CAMPAIGN.If you have had no activity between reporting
periods, complete Cover Page and Summary
Page. Enter -0- in receipts, enter -0- in expenses
and ending balance from last report.

7. Verification: I certify that this Election Finance Statement is prepared with all reasonable diligence and to the best of my knowledge the contents are true, accurate and complete.

President
Candidate/
Treasurer

Frank G. Simon, M.D.

Type or Print Name

Authorized Signature

Frank G. Simon

Date

7

Month

5

Day

93

Year

VT 230244082

SUMMARY PAGE

Candidate/Committee Freedom's Heritage Forum Period From 4/1/93 To 6/30/93

RECEIPTS

1. CONTRIBUTIONS: (Including all receipts from Fundraisers)

- a. Itemized by check or written instrument (Schedule 1, Item 7a) \$ 800.-
 b. Other receipts (Schedule 1, Item 7b) + \$ 25.-
 c. Receipts in currency (Number of people 463) + \$ 914.54
 (Individual cash contribution limit is \$100)
 d. Unitemized contributions (Number of people 205) + \$ 4,456.14
 (Contributions by check of \$300 or less) = \$ 6,197.68

2. TOTAL RECEIPTS

\$ 6,197.68

DISBURSEMENTS

3. TOTAL DISBURSEMENTS (Schedule 2, Item 7)

\$ -8,139.75

BALANCE STATEMENT

4. Ending balance of last report (Enter -0- if no previous report) \$ 17,388.38
 5. Amount received during reporting period (Line 2, Column 1) + \$ 6,197.68
 6. Sub-Total (Add lines 4 and 5) = \$ 23,586.06
 7. Amount disbursed during reporting period (Line 3, Column 1) - \$ 8,139.75
 8. ENDING BALANCE (Subtract Line 7 from Line 6) = \$ 15,446.31

9. Unpaid Bills or Other Obligations owed BY: (Schedule 5, Item 11) \$ -0-
 10. Debts and Obligations owed TO: (Schedule 5, Item 11) \$ -0-

THIS PERIOD CUMULATIVE THIS ELECTION

11. In-kind Contributions Received (Schedule 3, Item 7) \$ -0-

12. Fund Raisers (See attached Schedule) \$ 51320777082

KENTUCKY REGISTRY OF ELECTION FINANCE
140 WALNUT STREET
FRANKFORT, KENTUCKY 40601
15021 864-2238
FAX # 15021 864-5622

DISBURSEMENTS
SCHEDULE 2

1. Name of Candidate	2. Committee Name	3. This Statement Covers	4. Name, Address and Occupation of person to whom paid (if over \$25.00, disbursement must be made by check. Persons transporting voters to the polls must be paid by check and each payment must be itemized to include name and address of person to whom made.)	5. Purpose (be specific, \$25.00 or less show purpose, date and amount.)	6. Date	7. Amount Disbursed
		From 4 1 93 Month Day Year To 6 30 93 Month Day Year				
Kentucky Registry of Election Finance 190 Walnut St. Frankfort, Ky. 40601				Administrative Fee	4/4/93	111.89 ✓
Steve Magee Campaign Louisville, Ky. 40204				Campaign contribution	4/13/93	200. —
Checks Returned (Insufficient Funds)				Contributions to Freedom's Heritage Forum	4/30/93 & 5/28/93 Bank statements.	410. —
Executive West Hotel 830 Phillips Ln Louisville, Ky.				Meeting	6/9/93	188.56
Publisher's Printing Co PO Box 37500 Louisville, Ky. 40233				Printing	6/9/93	4,500. —
Publisher's Printing Co PO Box 37500 Louisville, Ky. 40233				To correct an error	6/9/93	2,500. —
Postmaster				stamps	6/15/93	29. —
Kentucky State Treasurer				Annual Registration fee	6/16/93	200. — ✓
				Subtotal This Page		8139.75
				Total This Period (only on last page of this schedule)		7827.84 391.39

KENTUCKY REGISTRY OF ELECTION FINANCE
140 WALNUT STREET
FRANKFORT, KENTUCKY 40601
1502) 584-2226
FAX # 1502) 584-5622

AM

ELECTION FINANCE STATEMENT COVER PAGE

1. Candidate Name

Social Security No.

Office Sought/Dist. No.

County of Residence

Political Party

N/A

2. Committee Name *Freedom's Heritage Forum*

Supporting Various Candidates

Office Sought/Dist. No. *11/A*

00194

3. Candidate/Committee Mailing Address

PO Box 6684
Louisville, Ky. 40206

Area Code/Phone No. (502) 845-6263

4. Treasurer's Name and Mailing Address

Art. Carmine
PO Box 6684
Louisville, Ky. 40206
Area Code/Phone No. (502) 845-6263

5. This Statement Covers

From Dec 31 92
Month Day Year
To March 31 93
Month Day Year

TYPE OF STATEMENT

- 6a. ☐ Pre-election (Quarterly Preceding - Future Year)
- b. ☐ Pre-election (32nd day preceding)
- c. ☐ Pre-election (12th day preceding)
- d. ☐ Post Election (30th day following)
- e. ☐ Post Election Supplemental (60th day following)
- f. ☐ Semi-annual Supplemental (candidate in previous election)
- g. ☐ Executive Committees of Political Parties
- h. ☒ Quarterly (Permanent Committees)
- i. ☐ Termination Month Day Year
- j. ☐ Amendment- Check one of the items above to indicate which statement is being amended.

Pre-election, Post Election or
Supplemental Statement relates to:

☐ Primary ☐ General ☐ Special

Date of Election

Month Day Year

NOTE: USE ONLY THOSE PAGES WHICH
APPLY TO YOUR INDIVIDUAL CAMPAIGN.

If you have had no activity between reporting
periods, complete Cover Page and Summary
Page. Enter -0- in receipts, enter -0- in ex-
penditures and ending balance from last report.

7. Verification: I certify that this Election Finance Statement is prepared with all reasonable diligence and to the best of my knowledge the contents are true, accurate and complete.

President
Candidate/
Treasurer

Frank G. Simon, M.O.

Type or Print Name

Frank G. Simon

Authorized Signature

Date 7/7/93

Month Day Year

OFFICE USE ONLY
RECEIVED

APR 6 2 05 PM '93

SUMMARY PAGE

Candidate/Committee Freedom's Heritage Forum

Period From Dec. 31, 1992 To March 31, 1993

RECEIPTS

COLUMN I THIS PERIOD	COLUMN II CUMULATIVE THIS ELECTION
----------------------------	--

1. CONTRIBUTIONS: (Including all receipts from Fundraisers)

- | | |
|--|----------------------|
| a. Itemized by check or written instrument (Schedule 1, Item 7a) | \$ <u>0.00</u> |
| b. Other receipts (Schedule 1, Item 7b) | + \$ <u>0.00</u> |
| c. Receipts in currency (Number of people <u>1220</u>)
(Individual cash contribution limit is \$100) | + \$ <u>1,652.14</u> |
| d. Unitemized contributions (Number of people <u>284</u>)
(Contributions by check of \$300 or less) | + \$ <u>6,863.38</u> |
| | <u>\$ 8,515.52</u> |

2. TOTAL RECEIPTS

DISBURSEMENTS

3. TOTAL DISBURSEMENTS (Schedule 2, Item 7)

\$ 2,237.84

BALANCE STATEMENT

- | | |
|--|-----------------------|
| 4. Ending balance of last report (Enter -0- if no previous report) | \$ <u>11,110.70</u> |
| 5. Amount received during reporting period (Line 2, Column 1) | + \$ <u>8,515.52</u> |
| 6. Sub-Total (Add lines 4 and 5) | = \$ <u>19,626.22</u> |
| 7. Amount disbursed during reporting period (Line 3, Column 1) | - \$ <u>2,237.84</u> |
| 8. ENDING BALANCE (Subtract Line 7 from Line 6) | = \$ <u>17,388.38</u> |

9. Unpaid Bills or Other Obligations owed BY: (Schedule 5, Item 11)

\$ 0.00

10. Debts and Obligations owed TO: (Schedule 5, Item 11)

THIS PERIOD	CUMULATIVE THIS ELECTION
----------------	-----------------------------

11. In-kind Contributions Received (Schedule 3, Item 7)

\$ 0.00

12. Fund Raisers (See attached Schedule)

\$ 0.00

61EE0277082

KENTUCKY REGISTRY OF ELECTION FINANCE
140 WALNUT STREET
FRANKFORT, KENTUCKY 40601
(502) 864-2228
FAX # (502) 864-5822

ITEMIZED RECEIPTS
SCHEDULE 1

1. Name of Candidate <i>N/A</i>		2. Committee Name <i>Freedem's Heritage Forum</i>		3. This Statement Covers From <i>12/31/92</i> Month Day Year To <i>3/31/93</i> Month Day Year			
4a. Name and Address from whom received. Enter age if not 18 by date of General Election.	4b. AGE	5. Type of Contribution or Other Receipt	6. Date of Receipt	7a. Contributions by Check or Written Instrument	7b. Other Receipts	8. Cumulative for election	9. Occupation and Employer of Contributor and Spouse of Contributor. (If self-employed, name under which doing business.) Occupation shall be specific.
		Contributions: <input type="checkbox"/> Candidate Direct <input type="checkbox"/> Candidate Loan <input type="checkbox"/> Direct from a person or authorized entity Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Fundraiser <input type="checkbox"/> Misc. (Specify) _____					
		Contributions: <input type="checkbox"/> Candidate Direct <input type="checkbox"/> Candidate Loan <input type="checkbox"/> Direct from a person or authorized entity Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Fundraiser <input type="checkbox"/> Misc. (Specify) _____					
		Contributions: <input type="checkbox"/> Candidate Direct <input type="checkbox"/> Candidate Loan <input type="checkbox"/> Direct from a person or authorized entity Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Fundraiser <input type="checkbox"/> Misc. (Specify) _____					
		Contributions: <input type="checkbox"/> Candidate Direct <input type="checkbox"/> Candidate Loan <input type="checkbox"/> Direct from a person or authorized entity Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Fundraiser <input type="checkbox"/> Misc. (Specify) _____					
		Contributions: <input type="checkbox"/> Candidate Direct <input type="checkbox"/> Candidate Loan <input type="checkbox"/> Direct from a person or authorized entity Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Fundraiser <input type="checkbox"/> Misc. (Specify) _____					
		Contributions: <input type="checkbox"/> Candidate Direct <input type="checkbox"/> Candidate Loan <input type="checkbox"/> Direct from a person or authorized entity Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Fundraiser <input type="checkbox"/> Misc. (Specify) _____					
		Contributions: <input type="checkbox"/> Candidate Direct <input type="checkbox"/> Candidate Loan <input type="checkbox"/> Direct from a person or authorized entity Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Fundraiser <input type="checkbox"/> Misc. (Specify) _____					
		Contributions: <input type="checkbox"/> Candidate Direct <input type="checkbox"/> Candidate Loan <input type="checkbox"/> Direct from a person or authorized entity Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Fundraiser <input type="checkbox"/> Misc. (Specify) _____					

Subtotal This Page

Total This Period (only on last page of this schedule)

Enter this total on line 1a of Summary Page	Enter this total on line 1b of Summary Page
- 0 -	- 0 -
- 0 -	- 0 -

KENTUCKY REGISTRY OF ELECTION FINANCE
140 WALNUT STREET
FRANKFORT, KENTUCKY 40601
(502) 644-2226
FAX # (502) 644-5622

DISBURSEMENTS
SCHEDULE 2

1. Name of Candidate	2. Committee Name	3. This Statement Covers	4. Name, Address and Occupation of person to whom paid (if over \$25.00, disbursement must be made by check. Persons transporting voters to the polls must be paid by check and each payment must be itemized to include name and address of person to whom made)	5. Purpose (be specific, \$25.00 or less show purpose, date and amount)	6. Date	7. Amount Disbursed
N/A	Freedom's Heritage Farm	From 12/31/92 To 3/31/93	Rev. Jerome Sutton for Aldermen Campaign Fund 742 S. 16 th St. Louisville, Ky. 40212 Minister	Campaign Contribution	1-25-93	\$ 500. =
Peter Hayer for Mayor	Campaign Contribution	2-6-93	Louisville, Ky. 40213 Salesman in Ad agency.	Mailing	3-5-93	\$ 1,237.84
Louisville Letter Service 4701 Pinewood Rd Louisville, Ky. 40219						

Subtotal This Page

Total This Period (only on last page of this schedule)

\$ 2,237.84
\$ 2,237.84



Kentucky Registry of Election Finance
1604 Louisville Road
Frankfort, Kentucky 40601
(502) 564-2226

OFFICE USE ONLY

DEC 29 12 33 PM '92

ELECTION FINANCE STATEMENT

COVER PAGE

1. Candidate Name Office Sought/Dist. No. County of Residence	} N/A
Political Party	
2. Committee Name Supporting various candidates Office Sought/Dist. No.	Freedom's Heritage Forum N/A

3. Candidate/Committee Mailing Address PO Box 6689 Louisville, Ky. 40207 Area Code/Phone (502) 895-6263	4. Treasurer's Name and Mailing Address Art Cerminara PO Box 6689 Louisville, Ky. 40207 Area Code/Phone (502) 895-6263	5. This Statement Covers From <u>9</u> <u>30</u> <u>92</u> Mo. Day Yr. To <u>12</u> <u>31</u> <u>92</u> Mo. Day Yr.
--	--	---

TYPE OF STATEMENT

- Pre-election, Post Election or Supplemental statement relates to:
- 6a. ☐ Pre-election (Quarterly Preceding)
- b. ☐ Pre-election (32nd day preceding)
- c. ☐ Pre-election (12th day preceding)
- d. ☐ Post Election (30th day following)
- e. ☐ Post Election Supplemental (60th day following)
- f. ☒ Quarterly (Permanent Committee)
- g. ☐ Semi-annual Supplemental (Opposed candidate in last election)
- h. ☐ Annual Supplemental (Unopposed candidate in last election)
- i. ☐ Termination
- Mo. Day Yr.
- j. ☐ Amendment - check one of the items above to indicate which statement is being amended.

7. Verification: Certify that all reasonable diligence was used in the preparation of this Statement and attached schedule (if any) and to the best of my/our knowledge and belief the contents are true, accurate and complete.

President
Treasurer
e. or Print Name
Signature
Date

Frank G. Simon, MD
David H. Simon, MD
12 - 31 - 92

2233077082

SUMMARY PAGE

Candidate/Committee Frederick's Heritage Forum

Period From 9-30-92 To 12-31-92

RECEIPTS

1. CONTRIBUTIONS:

a. Itemized by check or written instrument (Schedule 1, Item 7a)	+	\$	<u>00</u>	
b. Other receipts (Schedule 1, Item 7b)	+	\$	<u>00</u>	
c. Receipts in currency (Number of people <u>32</u>) Individual cash contribution limit is \$100	+	\$	<u>296.00</u>	
d. Unitemized contributions (Number of people <u>538</u>) Contributions by check of \$300 or less.	+	\$	<u>11,464.80</u>	
2. TOTAL RECEIPTS	=	\$	<u>11,760.80</u>	

DISBURSEMENTS

3. TOTAL DISBURSEMENTS (Schedule 2, Item 7)	\$	<u>15,464.66</u>	
---	----	------------------	--

BALANCE STATEMENT

4. Ending balance of last report (Enter (-) if no report has been filed)	+	\$	<u>14,814.56</u>	
5. Amount received during reporting period (Line 2, Column 1)	+	\$	<u>11,760.80</u>	
6. Sub-Total (Add Lines 4 and 5)	=	\$	<u>26,575.36</u>	
7. Amount disbursed during reporting period (Line 3, Column 1)	-	\$	<u>15,464.66</u>	
8. ENDING BALANCE (Subtract Line 7 from Line 6)	=	\$	<u>11,110.70</u>	

9. Debts and Obligations owed BY: (Schedule 5, Item 11)	\$	<u>00</u>	
---	----	-----------	--

10. Debts and Obligations owed TO: (Schedule 5, Item 11)	\$	<u>00</u>	
--	----	-----------	--

THIS PERIOD CUMULATIVE THIS ELECTION

11. In-Kind Contributions Received (Schedule 3, Item 7)	\$	<u>00</u>	
---	----	-----------	--

12. Fund (Schedule 4, Item 10)	\$	<u>00</u>	
--	----	-----------	--

2025077082

**ITEMIZED RECEIPTS
SCHEDULE 1**

KENTUCKY REGISTER OF ELECTION FINANCE 1604 Louisville Road Frankfort, Kentucky 40601 (502) 564-2228						ITEMIZED RECEIPTS SCHEDULE 1			
A. Name and Address from whom received Enter age if not 18 by date of General Election.		B. AGE	C. Type of Contribution or Other Receipt	D. Date of Receipt	E. AMOUNT	F. Cumulative for election	G. Contributor Occupation (Be Specific)	H. This Statement Covers From To	
					<div>7a. Contributions Check or Written Instrument</div> <div>7b. Other Receipts</div>			Mo Day Yr. 9 30 92 To 12 31 92	
			Contributions: <input type="checkbox"/> Candidate Direct <input type="checkbox"/> Candidate Loan <input checked="" type="checkbox"/> Direct from a person or authorized entity Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan from lending institution <input type="checkbox"/> Misc. (Specify) _____						
			Contributions: <input type="checkbox"/> Candidate Direct <input type="checkbox"/> Candidate Loan <input type="checkbox"/> Direct from a person or authorized entity Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan from lending institution <input type="checkbox"/> Misc. (Specify) _____						
			Contributions: <input type="checkbox"/> Candidate Direct <input type="checkbox"/> Candidate Loan <input type="checkbox"/> Direct from a person or authorized entity Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan from lending institution <input type="checkbox"/> Misc. (Specify) _____						
			Contributions: <input type="checkbox"/> Candidate Direct <input type="checkbox"/> Candidate Loan <input type="checkbox"/> Direct from a person or authorized entity Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan from lending institution <input type="checkbox"/> Misc. (Specify) _____						
					Subtotal This Page	- - 0 -	- - 0 -		

Total This Period (only on last page of this schedule)



Kentucky Registry of Election Finance
1001 Louisville Road
Frankfort, Kentucky 40601
(502) 566-2726

DISBURSEMENTS SCHEDULE 2

1. Name of Candidate		2. Committee Name		3. This Statement Covers	
N/A		Freedom's Heritage Forum		From 9/30/92 To 12/31/92	Mo. Day Yr.
4. Name and Address of person to whom paid (if over \$25.00, disbursement must be made by check. Persons transporting voters to the polls must be paid by check).	5. Purpose (be specific, \$25.00 or less show purpose, date and amount only).	6. Date	7. Amount Disbursed		
Correction for bad checks and adding mistakes		12/24/92	70. =		
The Record 1200 S. Shelby Louisville, Ky. 40203	Ad	10/16/92	165. =		
Louisville Letter Service 4701 Pinewood Rd Louisville, Ky. 40218	Mailing	10/20/92	1,400. =		
Kinko 4121 Shelbyville Rd Louisville, Ky. 40207	Printing	10/27/92	636. =		
"	"	10/30/92	333.90		
"	"	10/31/92	162.18		
" (Mary Lavin)	"	11/3/92	128.26		
Louisville Letter Service 4701 Pinewood Rd, Louisville, Ky 40218	Mailings	10/1/92	2,500. =		
"	"	11/3/92	7,569.32		
Publishers Press Shepherdsville, Ky. 40165	Printing	11/6/92	2,500. =		
Subtotal This Page			15,464.66		
Total This Period (only on last page of this schedule)			15,464.66		



Kentucky Registry of Election Finance
1604 Louisville Road
Frankfort, Kentucky 40601
(502) 564-2226

RECEIVED
Oct 7 4 07 PM '92
K.H.E.

OFFICE USE ONLY

ELECTION FINANCE STATEMENT

COVER PAGE

1. Candidate Name Office Sought/Dist. No. County of Residence Political Party.	} N/A
2. Committee Name Supporting various candidates Office Sought/Dist. No.	

3. Candidate/Committee Mailing Address PO Box 6689 Louisville, Ky. 40207 Area Code/Phone (502) 895-6263	4. Treasurer's Name and Mailing Address Art Cerninara PO Box 6689 Louisville, Ky. 40207 Area Code/Phone (502) 895-6263	5. This Statement Covers From <u>6</u> <u>30</u> <u>92</u> Mo. Day Yr. To <u>9</u> <u>30</u> <u>92</u> Mo. Day Yr.
--	--	--

TYPE OF STATEMENT

- 6a. ☐ Pre-election (Quarterly Preceding)
- b. ☐ Pre-election (32nd day preceding)
- c. ☐ Pre-election (12th day preceding)
- d. ☐ Post Election (30th day following)
- e. ☐ Post Election Supplemental (80th day following)
- f. ☒ Quarterly (Permanent Committee)
- g. ☐ Semi-annual Supplemental (Opposed candidate in last election)
- h. ☐ Annual Supplemental Runopposed candidate in last election)
- i. ☐ Termination
- j. ☐ Amendment - check one of the items above to indicate which statement is being amended.

7. Verification: Certify that all reasonable diligence was used in the preparation of this Statement and attached schedule (if any) and to the best of my/bour knowledge and belief the contents are true, accurate and complete.

President Frank G. Simon, MD Date Mo. Day Yr.

Signature Frank G. Simon, MD

92E30274082

SUMMARY PAGE

Candidate/Committee Freedom's Heritage Forum

Period From 6-30-82 To 9-30-92

RECEIPTS

1. CONTRIBUTIONS:

- a. Itemized by check or written instrument (Schedule 1, Item 7a)
- b. Other receipts (Schedule 1, Item 7b)
- c. Receipts in currency (Number of people 237)
Individual cash contribution limit is \$100
- d. Unitemized contributions (Number of people 409)
Contributions by check of \$300 or less.

+\$ 00

+\$ 00

+\$ 1,048.25

+\$ 11,111.55

=\$ 12,159.80

DISBURSEMENTS

3. TOTAL DISBURSEMENTS (Schedule 2, Item 7)

\$ 6,713.83

BALANCE STATEMENT

4. Ending balance of last report (Enter (-) if no report has been filed)
5. Amount received during reporting period (Line 2, Column 1)
6. Sub-Total (Add Lines 4 and 5)
7. Amount disbursed during reporting period (Line 3, Column 1)
8. ENDING BALANCE (Subtract Line 7 from Line 6)

+\$ 9,368.59

+\$ 12,159.80

=\$ 21,528.39

-\$ 6,713.83

=\$ 14,814.56

9. Debts and Obligations owed BY: (Schedule 5, Item 11)

\$ 00

10. Debts and Obligations owed TO: (Schedule 5, Item 11)

\$ 00

THIS PERIOD

CUMULATIVE THIS ELECTION

11. In-Kind Contributions Received (Schedule 3, Item 7)

\$ 00

\$

12. Fund Raisers (Schedule 4, Item 10)

4252077082

\$ 00



Kentucky Registry of Election Finance
1604 Louisville Road
Frankfort, Kentucky 40601
15021 564-2225

ITEMIZED RECEIPTS
SCHEDULE 1

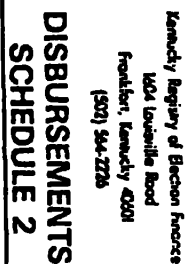
1. Name of Candidate		NA		2. Committee Name		Freedom's Heritage Forum		3. This Statement Covers	
								From 6 Mo. 30 Day 92 Yr.	
								To 9 Mo. 30 Day 92 Yr.	
4a. Name and Address from whom received Enter age if not 18 by date of General Election.	4b. AGE	5. Type of Contribution or Other Receipt	6. Date of Receipt	AMOUNT		8. Cumulative for election	9. Contributor Occupation (Be Specific)		
		Contributions: <input type="checkbox"/> Candidate Direct <input type="checkbox"/> Candidate Loan <input checked="" type="checkbox"/> Direct from a person or authorized entity Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan from lending institution <input type="checkbox"/> Misc. (Specify) _____		7a. Contributions Check or Written Instrument	7b. Other Receipts				
		Contributions: <input type="checkbox"/> Candidate Direct <input type="checkbox"/> Candidate Loan <input type="checkbox"/> Direct from a person or authorized entity Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan from lending institution <input type="checkbox"/> Misc. (Specify) _____							
		Contributions: <input type="checkbox"/> Candidate Direct <input type="checkbox"/> Candidate Loan <input type="checkbox"/> Direct from a person or authorized entity Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan from lending institution <input type="checkbox"/> Misc. (Specify) _____							
		Contributions: <input type="checkbox"/> Candidate Direct <input type="checkbox"/> Candidate Loan <input type="checkbox"/> Direct from a person or authorized entity Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan from lending institution <input type="checkbox"/> Misc. (Specify) _____							
		Contributions: <input type="checkbox"/> Candidate Direct <input type="checkbox"/> Candidate Loan <input type="checkbox"/> Direct from a person or authorized entity Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan from lending institution <input type="checkbox"/> Misc. (Specify) _____							
		Contributions: <input type="checkbox"/> Candidate Direct <input type="checkbox"/> Candidate Loan <input type="checkbox"/> Direct from a person or authorized entity Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan from lending institution <input type="checkbox"/> Misc. (Specify) _____							
Subtotal This Page				- 0 -	- 0 -				

Total This Period (only on last page of this schedule)

Enter this total on line 1a of Summary Page

Enter this total on line 1b of Summary Page

37220274082

**DISBURSEMENTS
SCHEDULE 2**

4. Name and Address of person to whom paid (if over \$25.00, disbursement must be made by check. Persons transporting voters to the polls must be paid by check).

Kentucky Registry of Election Finance
1604 Louisville Road
Frankfort, Kentucky 40601
(502) 544-2726

DISBURSEMENTS SCHEDULE 2

4. Name and Address of person to whom paid (if over \$25.00, disbursement must be made by check. Persons transporting voters to the polls must be paid by check).

1. Name of Candidate *N/A*

2. Committee Name

Freedom's Heritage Forum

5. Purpose (be specific, \$25.00 or less show purpose, date and amount only).

3. This Statement Covers

From *6* *30* *92*
Mo. Day Yr.
To *9* *30* *92*
Mo. Day Yr.

6. Date

7. Amount Disbursed

*Louisville Letter Service
4701 Pinewood Rd
Louisville, Ky.*

mailing

7/30/92

6,711.83

Jefferson County Treasurer

list of Candidates

7/31/92

2.-

Total This Period (only on last page of this schedule)

Subtotal This Page

6,713.83

Enter this code on line

28049201413205



Kentucky Registry of Election Finance
1604 Louisville Road
Franklin, Kentucky 40501
(502) 564-2226

ELECTION FINANCE STATEMENT

COVER PAGE

1. Candidate Name	} N A
Office Sought/Dist. No.	
County of Residence	
Political Party	
2. Committee Name	Freedom's Heritage Forum
Supporting various candidates	
Office Sought/Dist. No.	N A

RECEIVED
Jul 7 2 01 PM '92
K.R.E.F.

3. Candidate/Committee Mailing Address PO Box 6689 Louisville, Ky. 40207 Area Code/Phone (502) 895-6263	4. Treasurer's Name and Mailing Address Art Cerminara PO Box 6689 Louisville, Ky. 40207 Area Code/Phone (502) 895-6263	5. This Statement Covers From 3/31/92 To 6/30/92 Mo. Day Yr. Mo. Day Yr.
--	--	--

TYPE OF STATEMENT

- Pre-election, Post Election or Supplemental statement relates to:
- a. ☐ Pre-election (Quarterly Preceding)
- b. ☐ Pre-election (32nd day preceding)
- c. ☐ Pre-election (12th day preceding)
- d. ☐ Post Election (30th day following)
- e. ☐ Post Election Supplemental (60th day following)
- f. ☒ Quarterly Permanent Committee
- g. ☐ Semi-annual Supplemental (Opposed candidate in last election)
- h. ☐ Annual Supplemental (Unopposed candidate in last election)
- i. ☐ Termination Mo. Day Yr.
1. ☐ Amendment - check one of the items above to indicate which statement is being amended.

7. Verification: Certify that all reasonable diligence was used in the preparation of this Statement and attached schedule (if any) and to the best of my/four knowledge and belief the contents are true, accurate and complete.

President
Type or Print Name
Frank G. Simon, MD
Signature
Frank G. Simon, MD
Date
7-4-92
Mo. Day Yr.

0335027032

SUMMARY PAGE

Candidate/Committee Frederick's Heritage Farm

Period From 3-31-92 To 6-30-92

RECEIPTS

1. CONTRIBUTIONS:

- a. Itemized by check or written instrument (Schedule 1, Item 7a) +\$ 00-
- b. Other receipts (Schedule 1, Item 7b) +\$ 00-
- c. Receipts in currency (Number of people 503) +\$ 1,091.-
Individual cash contribution limit is \$100
- d. Unitemized contributions (Number of people 1) +\$ 2,433.-
Contributions by check of \$300 or less.
2. TOTAL RECEIPTS =\$ 3,524.-

DISBURSEMENTS

3. TOTAL DISBURSEMENTS (Schedule 2, Item 7) \$ 4,221.90

BALANCE STATEMENT

4. Ending balance of last report (Enter (-) if no report has been filed) +\$ 10,066.49
5. Amount received during reporting period (Line 2, Column 1) +\$ 3,524.-
6. Sub-Total (Add Lines 4 and 5) =\$ 13,590.49
7. Amount disbursed during reporting period (Line 3, Column 1) -\$ 4,221.90
8. ENDING BALANCE (Subtract Line 7 from Line 6) =\$ 9,368.59

9. Debts and Obligations owed BY: (Schedule 5, Item 11) \$ 00-

10. Debts and Obligations owed TO: (Schedule 5, Item 11) \$ 00-

11. In-Kind Contributions Received (Schedule 3, Item 7) \$ 00-

12. Fund Raisers (Schedule 4, Item 10) 12250277082 \$ 00-

COLUMN I
THIS
PERIOD

COLUMN II
CUMULATIVE
THIS ELECTION

THIS
PERIOD

CUMULATIVE
THIS ELECTION



Kentucky Registry of Election Finance
1604 Louisville Road
Frankfort, Kentucky 40601
(502) 564-2225

ITEMIZED RECEIPTS SCHEDULE 1

1. Name of Candidate		NA		2. Committee Name		Freedom's Heritage Forum		3. This Statement Covers	
								From <u>3-31-92</u> To <u>6-30-92</u>	
								Mo. Day Yr.	
								Mo. Day Yr.	
4a. Name and Address from whom received Enter age if not 18 by date of General Election.		4b. AGE	5. Type of Contribution or Other Receipt	6. Date of Receipt	AMOUNT		8. Cumulative for election	9. Contributor Occupation (Be Specific)	
			Contributions: <input type="checkbox"/> Candidate Direct <input type="checkbox"/> Candidate Loan <input checked="" type="checkbox"/> Direct from a person or authorized entity Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan from lending institution <input type="checkbox"/> Misc. (Specify) _____		7a. Contributions Check or Written Instrument	7b. Other Receipts			
			Contributions: <input type="checkbox"/> Candidate Direct <input type="checkbox"/> Candidate Loan <input type="checkbox"/> Direct from a person or authorized entity Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan from lending institution <input type="checkbox"/> Misc. (Specify) _____						
			Contributions: <input type="checkbox"/> Candidate Direct <input type="checkbox"/> Candidate Loan <input type="checkbox"/> Direct from a person or authorized entity Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan from lending institution <input type="checkbox"/> Misc. (Specify) _____						
			Contributions: <input type="checkbox"/> Candidate Direct <input type="checkbox"/> Candidate Loan <input type="checkbox"/> Direct from a person or authorized entity Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan from lending institution <input type="checkbox"/> Misc. (Specify) _____						
			Contributions: <input type="checkbox"/> Candidate Direct <input type="checkbox"/> Candidate Loan <input type="checkbox"/> Direct from a person or authorized entity Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan from lending institution <input type="checkbox"/> Misc. (Specify) _____						
			Contributions: <input type="checkbox"/> Candidate Direct <input type="checkbox"/> Candidate Loan <input type="checkbox"/> Direct from a person or authorized entity Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan from lending institution <input type="checkbox"/> Misc. (Specify) _____						
Subtotal This Page									
Total This Period (only on last page of this schedule)									

Enter this total on line 10 of Schedule 1

23220277082



DISBURSEMENTS
SCHEDULE 2

1. Name of Candidate N/A

2. Committee Name

Freedom's Heritage Forum

3. This Statement Covers

From 3-31-92 To 6-30-92

Mo. 3 Day 31 Yr. 92
Mo. 6 Day 30 Yr. 92

4. Name and Address of person to whom paid (if over \$25.00, disbursement must be made by check. Persons transporting voters to the polls must be paid by check.)

5. Purpose (be specific, \$25.00 or less show purpose, date and amount only).

6. Date

7. Amount Disbursed

Treasurer, Jefferson County

Street Book

6/24/92

35. -

Louisville, Ky.

Long distance phone calls

5/1/92

47.35

Louisville, Ky. 40219

Mastercard

Meeting (Food + room)

5/9/92

118.29

1830 S. 3rd
Louisville, Ky.

The Record
1200 S. Shelby
Louisville, Ky.

ad

5/14/92

380. -

Louisville Letter Service
4701 Pinewood Rd
Louisville, Ky.

Mailing

5/19/92

3,000. -

King Solomon Baptist Church
1620 Anderson
Louisville, Ky.

Donation

5/19/92

200. -

Stacey's Buffet
5717-A Preston Hwy
Louisville, Ky.

Meeting (Food + room)

5/19/92

100. -

Shedrick Jones - WLLV station
515 S. 3rd
Louisville, Ky.

Radio spots on WLLV

5/24/92

240. -

Dick Oles, 5311 Elise Way, Louisville, Ky.

Repay for expense of mailing to candidates

6/22/92

100.76

Subtotal This Page

4,221.90

Total This Period (only on last page of this schedule)

Enter this total on line 7 of Campaign Form



Kentucky Registry of Election Finance
1604 Louisville Road
Frankfort, Kentucky 40601
(502) 564-2226

ELECTION FINANCE STATEMENT

COVER PAGE

APR

OFFICE USE ONLY

RECEIVED
K.R.E.F.
APR 7 12 35 PM '92

1. Candidate Name Office Sought/Dist. No. County of Residence Political Party	} N/A
2. Committee Name Supporting various candidates Office Sought/Dist. No.	

3. Candidate/Committee Mailing Address PO Box 6689 Louisville, Ky. 40207 Area Code/Phone (502) 895-6263	4. Treasurer's Name and Mailing Address Art Cerminara PO Box 6689 Louisville, Ky. 40207 Area Code/Phone (502) 895-6263	5. This Statement Covers From <u>11/1/92</u> To <u>3/31/92</u> Mo. Day Yr. Mo. Day Yr.
--	--	--

TYPE OF STATEMENT

6a. ☐ Pre-election (Quarterly Preceding)

b. ☐ Pre-election (32nd day preceding)

c. ☐ Pre-election (12th day preceding)

d. ☐ Post Election (30th day following)

e. ☐ Post Election Supplemental (60th day following)

f. ☒ Quarterly (Permanent Committee)

g. ☐ Semi-annual Supplemental (Opposed candidate in last election)

h. ☐ Annual Supplemental (Unopposed candidate in last election)

i. ☐ Termination
Mo. Day Yr.

j. ☐ Amendment - check one of the items above to indicate which statement is being amended.

7. Verification: Certify that all reasonable diligence was used in the preparation of this Statement and attached schedule (if any) and to the best of my/four knowledge and belief the contents are true, accurate and complete.

President Frank G. Simon, MD Date 4/4/92
Type or Print Name Signature Mo. Day Yr.

73330277082

SUMMARY PAGE

Candidate/Committee Frederick's Heritage Farm

Period From 1/1/92 To 3/31/92

RECEIPTS

COLUMN I
THIS
PERIOD

COLUMN II
CUMULATIVE
THIS ELECTION

1. CONTRIBUTIONS:

- a. Itemized by check or written instrument (Schedule 1, Item 7a) +\$ 0.00
- b. Other receipts (Schedule 1, Item 7b) +\$ 0.00
- c. Receipts in currency (Number of people 213) +\$ 616.30
Individual cash contribution limit is \$100
- d. Unitemized contributions (Number of people 277) +\$ 4,739.90
Contributions by check of \$300 or less.
2. TOTAL RECEIPTS =\$ 5,356.20

DISBURSEMENTS

3. TOTAL DISBURSEMENTS (Schedule 2, Item 7) \$ 424.21

BALANCE STATEMENT

4. Ending balance of last report (Enter (-0-) if no report has been filed) +\$ 5,134.50
5. Amount received during reporting period (Line 2, Column 1) +\$ 5,356.20
6. Subtotal (Add Lines 4 and 5) =\$ 10,490.70
7. Amount disbursed during reporting period (Line 3, Column 1) -\$ 424.21
8. ENDING BALANCE (Subtract Line 7 from Line 6) =\$ 10,066.49

9. Debts and Obligations owed BY: (Schedule 5, Item 11) \$ 0.00

10. Debts and Obligations owed TO: (Schedule 5, Item 11) \$ 0.00

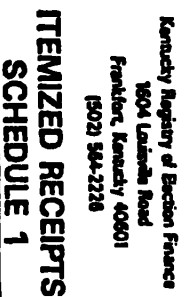
THIS
PERIOD

CUMULATIVE
THIS ELECTION

11. In-Kind Contributions Received (Schedule 3, Item 7) \$ 0.00

12. Fund Raisers (Schedule 4, Item 10) \$ 0.00

55250274002



**ITEMIZED RECEIPTS
SCHEDULE 1**

Kentucky Registry of Election Finance
1604 Louisville Road
Frankfort, Kentucky 40601
(502) 564-2226

ITEMIZED RECEIPTS SCHEDULE 1

4a. Name and Address from whom received <small>Enter age if not 18 by date of General Election.</small>	4b. AGE	5. Type of Contribution or Other Receipt	6. Date of Receipt	AMOUNT		B. Cumulative for election	C. Contributor Occupation (Be Specific)
				7a. Contributions Check or Written Instrument	7b. Other Receipts		
		Contributions: <input type="checkbox"/> Candidate Direct <input type="checkbox"/> Candidate Loan <input checked="" type="checkbox"/> Direct from a person or authorized entity Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan from lending institution Misc. (Specify) _____					
		Contributions: <input type="checkbox"/> Candidate Direct <input type="checkbox"/> Candidate Loan <input type="checkbox"/> Direct from a person or authorized entity Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan from lending institution Misc. (Specify) _____					
		Contributions: <input type="checkbox"/> Candidate Direct <input type="checkbox"/> Candidate Loan <input type="checkbox"/> Direct from a person or authorized entity Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan from lending institution Misc. (Specify) _____					
		Contributions: <input type="checkbox"/> Candidate Direct <input type="checkbox"/> Candidate Loan <input type="checkbox"/> Direct from a person or authorized entity Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan from lending institution Misc. (Specify) _____					
		Contributions: <input type="checkbox"/> Candidate Direct <input type="checkbox"/> Candidate Loan <input type="checkbox"/> Direct from a person or authorized entity Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan from lending institution Misc. (Specify) _____					
		Contributions: <input type="checkbox"/> Candidate Direct <input type="checkbox"/> Candidate Loan <input type="checkbox"/> Direct from a person or authorized entity Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan from lending institution Misc. (Specify) _____					
		Contributions: <input type="checkbox"/> Candidate Direct <input type="checkbox"/> Candidate Loan <input type="checkbox"/> Direct from a person or authorized entity Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan from lending institution Misc. (Specify) _____					
		Contributions: <input type="checkbox"/> Candidate Direct <input type="checkbox"/> Candidate Loan <input type="checkbox"/> Direct from a person or authorized entity Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan from lending institution Misc. (Specify) _____					
		Contributions: <input type="checkbox"/> Candidate Direct <input type="checkbox"/> Candidate Loan <input type="checkbox"/> Direct from a person or authorized entity Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan from lending institution Misc. (Specify) _____					

1. Name of Candidate	N A
2. Committee Name	Freedom's Heritage Forum
3. This Statement Covers From	To
Mo. 1/1/92	Mo. 3/31/92
Day	Day
Yr.	Yr.

Subtotal This Page

Total This Period (only on last page of this schedule)

--0--	--0--
-0-	-0-



Kentucky Registry of Election Finance
1604 Louisville Road
Frankfort, Kentucky 40601
(502) 564-2226

OFFICE USE ONLY

JAN 3 1 13 PM '92

ELECTION FINANCE STATEMENT

COVER PAGE

BAH

1. Candidate Name Office Sought/Dist. No. County of Residence Political Party	} N A
2. Committee Name Supporting various candidates Office Sought/Dist. No.	

3. Candidate/Committee Mailing Address PO Box 6689 Louisville, Ky. 40207 Area Code/Phone (502) 895-6263	4. Treasurer's Name and Mailing Address Art Cerminara PO Box 6689 Louisville, Ky. 40207 Area Code/Phone (502) 895-6263	5. This Statement Covers From <u>9</u> <u>30</u> <u>91</u> Mo. Day Yr. To <u>12</u> <u>31</u> <u>91</u> Mo. Day Yr.
--	--	---

TYPE OF STATEMENT

6a. ☐ Pre-election (Quarterly Preceding)

b. ☐ Pre-election (32nd day preceding)

c. ☐ Pre-election (12th day preceding)

d. ☐ Post Election (30th day following)

e. ☐ Post Election Supplemental (60th day following)

f. ☒ Quarterly (Permanent Committee)

g. ☐ Semi-annual Supplemental (Opposed candidate in last election)

h. ☐ Annual Supplemental (Unopposed candidate in last election)

i. ☐ Termination
Mo. Day Yr.

j. ☐ Amendment - check one of the items above to indicate which statement is being amended.

7. Verification: Certify that all reasonable diligence was used in the preparation of this Statement and attached schedule (if any) and to the best of my/our knowledge and belief the contents are true, accurate and complete.

President Frank C. Simon *Frank C. Simon*
Secretary David H. Simon, Jr. *David H. Simon, Jr.*
Date 1 1 92

SUMMARY PAGE

Candidate/Committee Freedom's Heritage Forum

Period From 9/30/91 To 12/31/91

RECEIPTS

1. CONTRIBUTIONS:

a. Itemized by check or written instrument (Schedule 1, Item 7a) +\$ 0.00
 b. Other receipts (Schedule 1, Item 7b) +\$ 381.36
 c. Receipts in currency (Number of people 288) +\$ 1,303.88
 Individual cash contribution limit is \$100
 d. Unitemized contributions (Number of people 367) +\$ 5,478.80
 Contributions by check of \$300 or less. =\$ 7,164.04

DISBURSEMENTS

3. TOTAL DISBURSEMENTS (Schedule 2, Item 7) \$ 9,501.41

BALANCE STATEMENT

4. Ending balance of last report (Enter (-) if no report has been filed) +\$ 7,471.87
 5. Amount received during reporting period (Line 2, Column 1) +\$ 7,164.04
 6. Sub-Total (Add Lines 4 and 5) =\$ 14,635.91
 7. Amount disbursed during reporting period (Line 3, Column 1) -\$ 9,501.41
 8. ENDING BALANCE (Subtract Line 7 from Line 6) =\$ 5,134.50
 9. Debts and Obligations owed BY: (Schedule 5, Item 11) \$ 0.00
 10. Debts and Obligations owed TO: (Schedule 5, Item 11) \$ 0.00

COLUMN I
THIS PERIOD
COLUMN II
CUMULATIVE
THIS ELECTION

11. In-Kind Contributions Received (Schedule 3, Item 7)

\$ 0.00

\$ 0.00

THIS PERIOD CUMULATIVE
THIS ELECTION

65520277082



Kentucky Registry of Election Finance
1604 Louisville Road
Frankfort, Kentucky 40601
(502) 564-2226

ITEMIZED RECEIPTS SCHEDULE 1

1. Name of Candidate		N/A					
2. Committee Name		Freedom's Heritage Forum					
3. This Statement Covers		From 9/30/91 To 12/31/91					
4a. Name and Address from whom received Enter age if not 18 by date of General Election.	4b. AGE	5. Type of Contribution or Other Receipt	6. Date of Receipt	7a. Contributions Check or Written Instrument	7b. Other Receipts	8. Cumulative for election	9. Contributor Occupation (Be Specific)
See "Fund Raisers" (Schedule 1)		Contributions: <input type="checkbox"/> Candidate Direct <input type="checkbox"/> Candidate Loan <input checked="" type="checkbox"/> Direct from a person or authorized entity Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan from lending institution <input type="checkbox"/> Misc. (Specify) _____			\$ 381.36		
		Contributions: <input type="checkbox"/> Candidate Direct <input type="checkbox"/> Candidate Loan <input type="checkbox"/> Direct from a person or authorized entity Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan from lending institution <input type="checkbox"/> Misc. (Specify) _____					
		Contributions: <input type="checkbox"/> Candidate Direct <input type="checkbox"/> Candidate Loan <input type="checkbox"/> Direct from a person or authorized entity Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan from lending institution <input type="checkbox"/> Misc. (Specify) _____					
		Contributions: <input type="checkbox"/> Candidate Direct <input type="checkbox"/> Candidate Loan <input type="checkbox"/> Direct from a person or authorized entity Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan from lending institution <input type="checkbox"/> Misc. (Specify) _____					
		Contributions: <input type="checkbox"/> Candidate Direct <input type="checkbox"/> Candidate Loan <input type="checkbox"/> Direct from a person or authorized entity Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan from lending institution <input type="checkbox"/> Misc. (Specify) _____					
		Contributions: <input type="checkbox"/> Candidate Direct <input type="checkbox"/> Candidate Loan <input type="checkbox"/> Direct from a person or authorized entity Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan from lending institution <input type="checkbox"/> Misc. (Specify) _____					
Subtotal This Page				\$ 381.36			



Kentucky Registry of Election Finance
1604 Louisville Road
Franklin, Kentucky 40601
(502) 544-2276

DISBURSEMENTS
SCHEDULE 2

1. Name of Candidate		2. Committee Name		3. This Statement Covers	
N/A		Freedom's Heritage Forum		From 9 Mo. 30 Day 91 Yr.	
				To 12 Mo. 31 Day 91 Yr.	
4. Name and Address of person to whom paid (if over \$25.00, disbursement must be made by check. Persons transporting voters to the polls must be paid by check).	5. Purpose (be specific, \$25.00 or less show purpose, date and amount only).	6. Date	7. Amount Disbursed		
Louisville Letter Service 4701 Pinewood Rd. Louisville, Ky. 40218	Mailing	10/22/91	2,000.-		
"	"	10/28/91	2,400.-		
"	"	10/31/91	708.42		
"	"	12/28/91	3,020.19		
Courier Journal 525 W. Broadway Louisville, Ky. 40202	Ad	11/1/91	153.-		
Benefits Plus 1000 Centerville Turnpike Virginia Beach, Virginia. 23463	Distributor Fee	11/20/91	20.-		
St. Martin De Porres New Hope Ky.	Printing	11/27/91	909.-		



Kentucky Registry of Election Finance

1001 Louisville Road
Frankfort, Kentucky 40601
(502) 364-2226

DISBURSEMENTS
SCHEDULE 2

4. Name and Address of person to whom paid (if over \$25.00, disbursement must be made by check. Persons transporting voters to the polls must be paid by check).

1. Name of Candidate N/A

2. Committee Name

Freedom's Heritage Forum

5. Purpose (be specific, \$25.00 or less show purpose, date and amount only).

3. This Statement Covers

From 9 30 91
Mo. Day Yr.
To 12 31 91
Mo. Day Yr.

6. Date

7. Amount Disbursed

Dench Video Service

9141 Bardstoun Rd
Louisville Ky

Videos

11/29/91

190.00

Hatcher for State Representative Fund

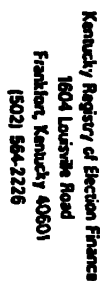
Donation

12/14/91

100.00

Subtotal This Page

2522024082



SCHEDULE 3

1. Name of Candidate	N/A																
2. Committee Name	Freedom's Heritage Forum																
3. This Statement Covers	<table border="1"> <tr> <td>From</td> <td>9</td> <td>30</td> <td>9/</td> </tr> <tr> <td>Mo.</td> <td></td> <td>Day</td> <td>Yr.</td> </tr> <tr> <td>To</td> <td>12</td> <td>31</td> <td>9/</td> </tr> <tr> <td>Mo.</td> <td></td> <td>Day</td> <td>Yr.</td> </tr> </table>	From	9	30	9/	Mo.		Day	Yr.	To	12	31	9/	Mo.		Day	Yr.
From	9	30	9/														
Mo.		Day	Yr.														
To	12	31	9/														
Mo.		Day	Yr.														

[illegible]

Subtotal This Page

Total This Period (only on last page of this schedule)

Further this will be



Kentucky Registry of Election Finance

1604 Louisville Road

Franklin, Kentucky 40601

(502) 564-2225

**FUND RAISERS
SCHEDULE 4**

SCHEDULE 4

[illegible]



Kentucky Registry of Election Finance
1504 Louisville Road
Frankfort, Kentucky 40601
(502) 564-2226

ELECTION FINANCE STATEMENT

COVER PAGE

AM

1. Candidate Name Office Sought/Dist. No. County of Residence Political Party	} N/A
2. Committee Name Supporting various candidates Office Sought/Dist. No. N/A	

3. Candidate/Committee Mailing Address PO Box 6689 Louisville, Ky. 40207 Area Code/Phone (502) 895-6263	4. Treasurer's Name and Mailing Address Art Cerminara PO Box 6689 Louisville, Ky. 40207 Area Code/Phone (502) 895-6263	5. This Statement Covers From <u>6</u> <u>30</u> <u>91</u> Mo. Day Yr. To <u>9</u> <u>30</u> <u>91</u> Mo. Day Yr.
--	--	--

TYPE OF STATEMENT

- Pre-election, Post Election or Supplemental statement relates to:
- 8a. ☐ Pre-election (Quarterly Preceding)
- 8b. ☐ Pre-election (32nd day preceding)
- 8c. ☐ Pre-election (12th day preceding)
- 8d. ☐ Post Election (30th day following)
- 8e. ☐ Post Election Supplemental (60th day following)
- 8f. ☒ Quarterly (Permanent Committee)
- 8g. ☐ Semi-annual Supplemental (Opposed candidate in last election)
- 8h. ☐ Annual Supplemental (Unopposed candidate in last election)
- 8i. ☐ Termination
- 8j. ☐ Amendment - check one of the items above to indicate which statement is being amended.

7. Verification: Certify that all reasonable diligence was used in the preparation of this Statement and attached schedule (if any) and to the best of my/our knowledge and belief the contents are true, accurate and complete.

President
Type or Print Name
Frank G. Simon, MD
Date
Mo 10 Day 8 Yr 91
Signature
Frank G. Simon
Frank G. Simon, MD

OFFICE USE ONLY

RECEIVED
OCT 10 4 02 PM '91

RECEIVED
OCT 10 2 01

57230277082

SUMMARY PAGE

Candidate/Committee Freedom's Heritage Forum

Period From 6-30-91 To 9-30-91

RECEIPTS

COLUMN I	COLUMN II
THIS	CUMULATIVE
PERIOD	THIS ELECTION

1. CONTRIBUTIONS:

a. Itemized by check or written instrument (Schedule 1, Item 7a)	+\$ <u>00</u>	\$
b. Other receipts (Schedule 1, Item 7b)	+\$ <u>1,886.86</u>	
c. Receipts in currency (Number of people <u>2</u>) Individual cash contribution limit is \$100	+\$ <u>21.00</u>	\$
d. Unitemized contributions (Number of people <u>323</u>) Contributions by check of \$300 or less.	+\$ <u>2,408.61</u>	
2. TOTAL RECEIPTS	= \$ <u>4,316.47</u>	\$

DISBURSEMENTS

3. TOTAL DISBURSEMENTS (Schedule 2, Item 7)

\$ 00

\$

BALANCE STATEMENT

4. Ending balance of last report (Enter (-0-) if no report has been filed)	+\$ <u>3,155.40</u>	
5. Amount received during reporting period (Line 2, Column 1)	+\$ <u>4,316.47</u>	
6. Sub-Total (Add Lines 4 and 5)	= \$ <u>7,471.87</u>	
7. Amount disbursed during reporting period (Line 3, Column 1)	-\$ <u>00</u>	
8. ENDING BALANCE (Subtract Line 7 from Line 6)	= \$ <u>7,471.87</u>	
9. Debts and Obligations owed BY: (Schedule 5, Item 11)	\$ <u>00</u>	
10. Debts and Obligations owed TO: (Schedule 5, Item 11)	\$ <u>00</u>	

THIS	CUMULATIVE
PERIOD	THIS ELECTION

11. In-Kind Contributions Received (Schedule 3, Item 7)

\$

\$



Kentucky Registry of Election Finance
1604 Louisville Road
Frankfort, Kentucky 40601
(502) 564-2225

ITEMIZED RECEIPTS SCHEDULE 1

1. Name of Candidate		2. Committee Name		3. This Statement Covers			
N/A		Freedom's Heritage Forum		From 6/30/91 To 9/30/91			
4a. Name and Address from whom received Enter age if not 18 by date of General Election.	4b. AGE	5. Type of Contribution or Other Receipt	6. Date of Receipt	AMOUNT		8. Cumulative for election	9. Contributor Occupation (Be Specific)
				7a. Contributions Check or Written Instrument	7b. Other Receipts		
See "Fund Raiser" (Schedule)		Contributions: <input type="checkbox"/> Candidate Direct <input type="checkbox"/> Candidate Loan <input checked="" type="checkbox"/> Direct from a person or authorized entity Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan from lending institution <input type="checkbox"/> Misc. (Specify) _____			1,886.86		
		Contributions: <input type="checkbox"/> Candidate Direct <input type="checkbox"/> Candidate Loan <input type="checkbox"/> Direct from a person or authorized entity Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan from lending institution <input type="checkbox"/> Misc. (Specify) _____					
		Contributions: <input type="checkbox"/> Candidate Direct <input type="checkbox"/> Candidate Loan <input type="checkbox"/> Direct from a person or authorized entity Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan from lending institution <input type="checkbox"/> Misc. (Specify) _____					
		Contributions: <input type="checkbox"/> Candidate Direct <input type="checkbox"/> Candidate Loan <input type="checkbox"/> Direct from a person or authorized entity Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan from lending institution <input type="checkbox"/> Misc. (Specify) _____					
		Contributions: <input type="checkbox"/> Candidate Direct <input type="checkbox"/> Candidate Loan <input type="checkbox"/> Direct from a person or authorized entity Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan from lending institution <input type="checkbox"/> Misc. (Specify) _____					
		Contributions: <input type="checkbox"/> Candidate Direct <input type="checkbox"/> Candidate Loan <input type="checkbox"/> Direct from a person or authorized entity Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan from lending institution <input type="checkbox"/> Misc. (Specify) _____					
Subtotal This Page				1,886.86			

Total This Period (only on last page of this schedule)

Enter this total on line 10 Enter this total on line 11

47330277082



2.2.1. Division of Classes Finances

Registry of Circulation

**1824 LUGSWING ROAD
Evanston, Kentucky 40601**

ISO 9154-2225

**FUND RAISERS
SCHEDULE 4**

1. Name of Candidate	N A			
2. Committee Name	Freedom's Heritage Forum			
3. This Statement Covers	From			
	Mo.	Day	Yr.	
	9	30	91	
	To			
	Mo.	Day	Yr.	

[illegible]

NOTE: Individual Entries on this schedule recap information reported in other schedules being filed. This schedule is not to be filed separately but must be included with the Election Finance Statement covering the period in which the fund raising activity took place.



Kentucky Registry of Election Finance
1604 Louisville Road
Frankfort, Kentucky 40601
(502) 564-2226

ELECTION FINANCE STATEMENT

COVER PAGE

OPAL

1. Candidate Name	} N A
Office Sought/Dist. No.	
County of Residence	
Political Party	
2. Committee Name	Freedom's Heritage Forum
Supporting various candidates	
Office Sought/Dist. No.	N A

3. Candidate/Committee Mailing Address PO Box 6689 Louisville, Ky. 40207 Area CodePhone (502) 895-6263	4. Treasurer's Name and Mailing Address Jean Stultz PO Box 6689 Louisville, Ky. 40207 Area CodePhone (502) 895-6263	5. This Statement Covers From <u>3</u> <u>31</u> <u>91</u> Mo. Day Yr. To <u>6</u> <u>30</u> <u>91</u> Mo. Day Yr.
---	---	--

TYPE OF STATEMENT

6a. <input type="checkbox"/> Pre-election (Quarterly Preceding)	Pre-election, Post Election or Supplemental statement relates to: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Special	Date of Election Mo. Day Yr.
b. <input type="checkbox"/> Pre-election (32nd day preceding)		
c. <input type="checkbox"/> Pre-election (12th day preceding)		
d. <input type="checkbox"/> Post Election (30th day following)		
e. <input type="checkbox"/> Post Election Supplemental (60th day following)		
f. <input checked="" type="checkbox"/> Quarterly (Permanent Committee)		
g. <input type="checkbox"/> Semi-annual Supplemental (Opposed candidate in last election)		
h. <input type="checkbox"/> Annual Supplemental (Unopposed candidate in last election)		
i. <input type="checkbox"/> Termination		
Mo. Day Yr.		
j. <input type="checkbox"/> Amendment - check one of the items above to indicate which statement is being amended.		

7. Verification: Certify that all reasonable diligence was used in the preparation of this Statement and attached schedule (if any) and to the best of my/our knowledge and belief the contents are true, accurate and complete.

President	Frank G. Simon, MD	Signature	Frank G. Simon, MD	Date	7	1	91
Treasurer		Type or Print Name		Mo.	Day	Yr.	

RECEIVED
JUL 8 12 28 PM '91

65250277082

SUMMARY PAGE

Candidate/Committee Freedom's Heritage Forum

Period From 3-31-91 To 6-30-91

RECEIPTS

COLUMN I
THIS
PERIOD

COLUMN II
CUMULATIVE
THIS ELECTION

1. CONTRIBUTIONS:

a. Itemized by check or written instrument (Schedule 1, Item 7a)	+\$ <u>0-</u>	
b. Other receipts (Schedule 1, Item 7b)	+\$ <u>108.56</u>	
c. Receipts in currency (Number of people <u>10</u>) Individual cash contribution limit is \$100	+\$ <u>160.-</u>	\$ <u> </u>
d. Unitemized contributions (Number of people <u>123</u>) Contributions by check of \$300 or less.	+\$ <u>2,782.30</u>	
2. TOTAL RECEIPTS	= \$ <u>2,990.86</u>	\$ <u> </u>

DISBURSEMENTS

3. TOTAL DISBURSEMENTS (Schedule 2, Item 7)	\$ <u>5,952.25</u>	\$ <u> </u>
---	--------------------	----------------------

BALANCE STATEMENT

4. Ending balance of last report (Enter (I-O-) if no report has been filed)	+\$ <u>6,116.79</u>	
5. Amount received during reporting period (Line 2, Column 1)	+\$ <u>2,990.86</u>	
6. Sub-Total (Add Lines 4 and 5)	= \$ <u>9,107.65</u>	
7. Amount disbursed during reporting period (Line 3, Column 1)	- \$ <u>5,952.25</u>	
8. ENDING BALANCE (Subtract Line 7 from Line 6)	= \$ <u>3,155.40</u>	

9. Debts and Obligations owed BY: (Schedule 5, Item 11)	\$ <u>0-</u>	
---	--------------	--

10. Debts and Obligations owed TO: (Schedule 5, Item 11)	\$ <u>0-</u>	
--	--------------	--

THIS
PERIOD

CUMULATIVE
THIS ELECTION

11. In-Kind Contributions Received (Schedule 3, Item 7)	\$ <u>0-</u>	\$ <u> </u>
---	--------------	----------------------

12. Fund Raisers (Schedule 4, Item 10)	\$ <u>see line 16 above</u>	
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0525077082



Kentucky Registry of Election Finance
1604 Louisville Road
Frankfort, Kentucky 40601
15021 564-2226

ITEMIZED RECEIPTS SCHEDULE 1

1. Name of Candidate		N/A						
2. Committee Name		Freedom's Heritage Forum						
3. This Statement Covers		From 3/31/91 To 6/30/91						
4a. Name and Address from whom received Enter age if not 18 by date of General Election.	4b. AGE	5. Type of Contribution or Other Receipt		6. Date of Receipt	AMOUNT		8. Cumulative for election	9. Contributor Occupation (Be Specific)
		7a. Contributions Check or Written Instrument	7b. Other Receipts					
See "Fund Raises" (Schedule 4)		<input type="checkbox"/> Contributions: <input type="checkbox"/> Candidate Direct <input type="checkbox"/> Candidate Loan <input checked="" type="checkbox"/> Direct from a person or authorized entity Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan from lending institution <input type="checkbox"/> Misc. (Specify) _____				108.56		
		<input type="checkbox"/> Contributions: <input type="checkbox"/> Candidate Direct <input type="checkbox"/> Candidate Loan <input type="checkbox"/> Direct from a person or authorized entity Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan from lending institution <input type="checkbox"/> Misc. (Specify) _____						
		<input type="checkbox"/> Contributions: <input type="checkbox"/> Candidate Direct <input type="checkbox"/> Candidate Loan <input type="checkbox"/> Direct from a person or authorized entity Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan from lending institution <input type="checkbox"/> Misc. (Specify) _____						
		<input type="checkbox"/> Contributions: <input type="checkbox"/> Candidate Direct <input type="checkbox"/> Candidate Loan <input type="checkbox"/> Direct from a person or authorized entity Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan from lending institution <input type="checkbox"/> Misc. (Specify) _____						
		<input type="checkbox"/> Contributions: <input type="checkbox"/> Candidate Direct <input type="checkbox"/> Candidate Loan <input type="checkbox"/> Direct from a person or authorized entity Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan from lending institution <input type="checkbox"/> Misc. (Specify) _____						
		<input type="checkbox"/> Contributions: <input type="checkbox"/> Candidate Direct <input type="checkbox"/> Candidate Loan <input type="checkbox"/> Direct from a person or authorized entity Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan from lending institution <input type="checkbox"/> Misc. (Specify) _____						
		<input type="checkbox"/> Contributions: <input type="checkbox"/> Candidate Direct <input type="checkbox"/> Candidate Loan <input type="checkbox"/> Direct from a person or authorized entity Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan from lending institution <input type="checkbox"/> Misc. (Specify) _____						
		<input type="checkbox"/> Contributions: <input type="checkbox"/> Candidate Direct <input type="checkbox"/> Candidate Loan <input type="checkbox"/> Direct from a person or authorized entity Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan from lending institution <input type="checkbox"/> Misc. (Specify) _____						

Subtotal This Page

Total This Period (only on last page of this schedule)

108.56	108.56
0.00	0.00

Enter this total on line 11 of Summary Page
Enter this total on line 1b of Summary Page

15330277082



Kentucky Registry of Election Finance

1604 Louisville Road
Frankfort, Kentucky 40601
(502) 564-2226

DISBURSEMENTS SCHEDULE 2

Kentucky Registry of Election Finance
1004 Louisville Road
Franklin, Kentucky 40001
(502) 564-2226

DISBURSEMENTS SCHEDULE 2

4. Name and Address of person to whom paid (if over \$25.00, disbursement must be made by check. Persons transporting voters to the polls must be paid by check).

1. Name of Candidate
NA

2. Committee Name
Freedom's Heritage Forum

3. This Statement Covers
From 3 31 91
Mo. Day Yr.
To 6 30 91
Mo. Day Yr.

5. Purpose (be specific, \$25.00 or less show purpose, date and amount only).

6. Date

7. Amount Disbursed

Louisville Letter Service

Postage for mailing

5/13/91

1,000.=

" " "

" " "

5/16/91

750.=

Mrs. Cheryl Gruentkner

calling

5/30/91

24.=

Miss Lisa Dickens

calling

5/30/91

24.=

Louisville Letter Service

Printing and Mailing

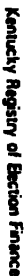
6/30/91

4,157.25

Total This Period (only on last page of this schedule)

Subtotal This Page

Enter this code on line
7 of C form. Plus



**1604 Louisville Road
Franklin, Kentucky 40601**

**FUND RAISERS
SCHEDULE 4**

1. Name of Candidate	N A			
2. Committee Name	Freedom's Heritage Forum			
3. This Statement Covers	From	3	31	91
	Mo.		Day	Yr.
	To	6	30	91
	Mo.		Day	Yr.

[illegible]

NOTE: Individual Entries on this schedule recap information reported in other schedules being filed. This schedule is not to be filed separately but must be included with the Election Finance Statement covering the period in which the fund raising activity took place.



Kentucky Registry of Election Finance
1804 Louisville Road
Frankfort, Kentucky 40601
(502) 564-2225

ELECTION FINANCE STATEMENT

OFFICE USE ONLY

RECEIVED
K. R. T. P.
APR 3 10 30 AM '91

COVER PAGE

1. Candidate Name Office Sought/Dist. No. County of Residence Political Party	} N A
2. Committee Name Supporting various candidates Office Sought/Dist. No.	

3. Candidate/Committee Mailing Address PO Box 6689 Louisville, Ky. 40207 Area Code/Phone (502) 895-6263	4. Treasurer's Name and Mailing Address Jean Stultz PO Box 6689 Louisville, Ky. 40207 Area Code/Phone (502) 895-6263	5. This Statement Covers From 1/1/91 To 3/31/91
--	--	---

TYPE OF STATEMENT

6a. <input type="checkbox"/> Pre-election (Quarterly Preceding)	Pre-election, Post Election or Supplemental statement relates to:	Date of Election Mo. Day Yr.
b. <input type="checkbox"/> Pre-election (32nd day preceding)		
c. <input type="checkbox"/> Pre-election (12th day preceding)		
d. <input type="checkbox"/> Post Election (30th day following)		
e. <input type="checkbox"/> Post Election Supplemental (60th day following)		
f. <input checked="" type="checkbox"/> Quarterly (Permanent Committee)		
g. <input type="checkbox"/> Semi-annual Supplemental (Opposed candidate in last election)		
h. <input type="checkbox"/> Annual Supplemental (Unopposed candidate in last election)		
i. <input type="checkbox"/> Termination		
j. <input type="checkbox"/> Amendment - check one of the items above to indicate which statement is being amended.		

7. Verification: Certify that all reasonable diligence was used in the preparation of this Statement and attached schedule (if any) and to the best of my/four knowledge and belief the contents are true, accurate and complete.

President Frank G. Simon, MD Date 3/31/91
Type or Print Name Signature

75220277082

SUMMARY PAGE

Candidate/Committee Fredson's Heritage Forum

Period From 1/1/91 To 3/31/91

RECEIPTS

1. CONTRIBUTIONS:

- | | | | |
|--|------|----------------|----------------------|
| a. Itemized by check or written instrument (Schedule 1, Item 7a) | + \$ | <u>- 0 -</u> | |
| b. Other receipts (Schedule 1, Item 7b) | + \$ | <u>- 41.96</u> | |
| c. Receipts in currency (Number of people <u> </u>)
Individual cash contribution limit is \$100 | + \$ | <u>- 0 -</u> | \$ <u> </u> |
| d. Unitemized contributions (Number of people <u>37</u>)
Contributions by check of \$300 or less. | + \$ | <u>992.04</u> | |
| 2. TOTAL RECEIPTS | = \$ | <u>950.08</u> | \$ <u> </u> |

DISBURSEMENTS

3. TOTAL DISBURSEMENTS (Schedule 2, Item 7)

BALANCE STATEMENT

- | | |
|---|---------------|
| 4. Ending balance of last report (Enter (-)- if no report has been filed) | + \$ 3,166.11 |
| 5. Amount received during reporting period (Line 2, Column 1) | + \$ 952.08 |
| 6. Sub-Total (Add Lines 4 and 5) | = \$ 4,118.19 |
| 7. Amount disbursed during reporting period (Line 3, Column 1) | - \$ 100.00 |
| 8. ENDING BALANCE (Subtract Line 7 from Line 6) | = \$ 4,018.19 |
| 9. Debts and Obligations owed BY: (Schedule 5, Item 11) | \$ 100.00 |
| 10. Debts and Obligations owed TO: (Schedule 5, Item 11) | \$ 100.00 |

- | | | |
|---|----------|----------|
| 11. In-Kind Contributions Received (Schedule 3, Item 7) | \$ _____ | \$ _____ |
| 12. Fund Raisers (Schedule 4, Item 10) | \$ _____ | |

08-06-97

**ITEMIZED RECEIPTS
SCHEDULE 1**

Kentucky Registry of Election Finance

1804 Louisville Road
Frankfort, Kentucky 40601
(502) 564-2226

ITEMIZED RECEIPTS
SCHEDULE 1

1. Name of Candidate		2. Committee Name		3. This Statement Covers			
NA		Freedom's Heritage Forum		From	To		
				Mo. 1	Mo. 3		
				Day 1	Day 31		
				Yr. 91	Yr. 91		
4a. Name and Address from whom received Enter age if not 18 by date of General Election.	4b. AGE	5. Type of Contribution or Other Receipt	6. Date of Receipt	7a. Contributions Check or Written Instrument	7b. Other Receipts	8. Cumulative for election	9. Contributor Occupation (Be Specific)
See "Fund Raisers" (Schedule)		Contributions: <input type="checkbox"/> Candidate Direct <input type="checkbox"/> Candidate Loan <input checked="" type="checkbox"/> Direct from a person or authorized entity Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan from lending institution <input type="checkbox"/> Misc. (Specify) _____			- 41,96		
		Contributions: <input type="checkbox"/> Candidate Direct <input type="checkbox"/> Candidate Loan <input type="checkbox"/> Direct from a person or authorized entity Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan from lending institution <input type="checkbox"/> Misc. (Specify) _____					
		Contributions: <input type="checkbox"/> Candidate Direct <input type="checkbox"/> Candidate Loan <input type="checkbox"/> Direct from a person or authorized entity Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan from lending institution <input type="checkbox"/> Misc. (Specify) _____					
		Contributions: <input type="checkbox"/> Candidate Direct <input type="checkbox"/> Candidate Loan <input type="checkbox"/> Direct from a person or authorized entity Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan from lending institution <input type="checkbox"/> Misc. (Specify) _____					
		Contributions: <input type="checkbox"/> Candidate Direct <input type="checkbox"/> Candidate Loan <input type="checkbox"/> Direct from a person or authorized entity Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan from lending institution <input type="checkbox"/> Misc. (Specify) _____					
		Contributions: <input type="checkbox"/> Candidate Direct <input type="checkbox"/> Candidate Loan <input type="checkbox"/> Direct from a person or authorized entity Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan from lending institution <input type="checkbox"/> Misc. (Specify) _____					
		Contributions: <input type="checkbox"/> Candidate Direct <input type="checkbox"/> Candidate Loan <input type="checkbox"/> Direct from a person or authorized entity Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan from lending institution <input type="checkbox"/> Misc. (Specify) _____					
		Contributions: <input type="checkbox"/> Candidate Direct <input type="checkbox"/> Candidate Loan <input type="checkbox"/> Direct from a person or authorized entity Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan from lending institution <input type="checkbox"/> Misc. (Specify) _____					
		Contributions: <input type="checkbox"/> Candidate Direct <input type="checkbox"/> Candidate Loan <input type="checkbox"/> Direct from a person or authorized entity Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan from lending institution <input type="checkbox"/> Misc. (Specify) _____					

Total This Period (only on last page of this schedule)

Subtotal This Page

Enter this total on line 14 of Summary Page	Enter this total on line 10 of Summary Page
14	10



1604 Louisville Road
Frankfort, Kentucky 40601
(502) 564-2226

**FUND RAISERS
SCHEDULE 4**

1. Name of Candidate	N A							
2. Committee Name	Freedom's Heritage Forum							
3. This Statement Covers	From	Mo.	Day	Yr.	To	Mo.	Day	Yr.
	1		1	91	3		31	91

4. Date Event was Held	5. Number of Individuals Participating	6. Type of Fund Raising Activity	7. Name and Address of the Location where Activity Held	8. Receipts	9. Cost
1/1/91 - 3/31/91	30	Selling Cookies	Jefferson County	\$ 2,112.04	\$ 2,154.00 To Phoenix Cookie Co.
NOTE: Individual Entries on this schedule recap information reported in other schedules being filed. This schedule is not to be filed separately but must be included with the Election Finance Statement covering the period in which the fund raising activity took place.				10. Total - 41.96	

NOTE: Individual Entries on this schedule recap information reported in other schedules being filed. This schedule is not to be filed separately but must be included with the Election Finance Statement covering the period in which the fund raising activity took place.

**Enter this code on line
12 Summary Page**



Kentucky Registry of Election Finance
1604 Louisville Road
Frankfort, Kentucky 40601
(502) 564-2226

ELECTION FINANCE STATEMENT

COVER PAGE

1. Candidate Name	Office Sought/Dist. No.	County of Residence	Political Party
	NA		
2. Committee Name			
Frederick's Heritage Forum			
Supporting various candidates			
Office Sought/Dist. No. NA			

RECEIVED
R.R.E.F.
JAN 3 1 26 PM '91

OFFICE USE ONLY

3. Candidate/Committee Mailing Address	4. Treasurer's Name and Mailing Address	5. This Statement Covers
PO Box 6689 Louisville, Ky. 40207 Area Code/Phone (502) 895-6263	Jeann Stultz PO Box 6689 Louisville, Ky. 40207 Area Code/Phone (502) 895-6263	From Oct. 1 90 To Dec. 31 1990

TYPE OF STATEMENT

Pre-election, Post Election or Supplemental statement relates to:

Date of Election

- ☐ Pre-election (Quarterly Preceding)
- ☐ Pre-election (32nd day preceding)
- ☐ Pre-election (12th day preceding)
- ☐ Post Election (30th day following)
- ☐ Post Election Supplemental (60th day following)
- ☒ Quarterly (Permanent Committee)
- ☐ Semi-annual Supplemental (Opposed candidate in last election)
- ☐ Annual Supplemental (Unopposed candidate in last election)
- ☐ Termination
- ☐ Amendment - check one of the items above to indicate which statement is being amended.

Mo. Day Yr.

7. Verification: Certify that all reasonable diligence was used in the preparation of this Statement and attached schedule (if any) and to the best of my/our knowledge and belief the contents are true, accurate and complete.

President Frank G. Simon, MD
Type or Print Name
Signature
Date 1 1 91

85220274087

SUMMARY PAGE

Candidate/Committee Freedom's Heritage Forum

Period From Oct. 1, 1990 To Dec. 31, 1990

RECEIPTS

COLUMN I
THIS
PERIOD
COLUMN II
CUMULATIVE
THIS ELECTION

1. CONTRIBUTIONS:

a. Itemized by check or written instrument (Schedule 1, Item 7a)	+ \$ <u>00-</u>	\$ <u> </u>
b. Other receipts (Schedule 1, Item 7b)	+ \$ <u>432.-</u>	\$ <u> </u>
c. Receipts in currency (Number of people <u> </u>) Individual cash contribution limit is \$100	+ \$ <u>00-</u>	\$ <u> </u>
d. Unitemized contributions (Number of people <u>273</u>) Contributions by check of \$300 or less.	+ \$ <u>5,474.20</u>	\$ <u> </u>
2. TOTAL RECEIPTS	= \$ <u>5,906.20</u>	\$ <u> </u>

DISBURSEMENTS

3. TOTAL DISBURSEMENTS (Schedule 2, Item 7)	\$ <u>2,751.36</u>	\$ <u> </u>
---	--------------------	----------------------

BALANCE STATEMENT

4. Ending balance of last report (Enter (-0-) if no report has been filed)	+ \$ <u>2,011.87</u>	
5. Amount received during reporting period (Line 2, Column 1)	+ \$ <u>5,906.20</u>	
6. Sub-Total (Add Lines 4 and 5)	= \$ <u>7,918.07</u>	
7. Amount disbursed during reporting period (Line 3, Column 1)	- \$ <u>2,751.36</u>	
8. ENDING BALANCE (Subtract Line 7 from Line 6)	= \$ <u>5,166.71</u>	
9. Debts and Obligations owed BY: (Schedule 5, Item 11)	\$ <u>00-</u>	
10. Debts and Obligations owed TO: (Schedule 5, Item 11)	\$ <u>00-</u>	

11. In-Kind Contributions Received (Schedule 3, Item 7)

THIS
PERIOD
CUMULATIVE
THIS ELECTION

12 Fund Balance (Schedule 4 Item 10) 65220277082

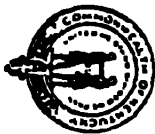
\$ \$
432. = (see "b" above)



Kentucky Registry of Election Finance
1604 Louisville Road
Franklin, Kentucky 40601
(502) 564-2226

**ITEMIZED RECEIPTS
SCHEDULE 1**

1. Name of Candidate	2. Committee Name	3. This Statement Covers			
		From _____ Mo. Day Yr.	To _____ Mo. Day Yr.		
5. Type of Contribution or Other Receipt	6. Date of Receipt	AMOUNT		8. Cumulative for election	9. Contributor Occupation (Be Specific)
		7a. Contributions Check or Written Instrument	7b. Other Receipts		
Contributions: <input type="checkbox"/> Candidates Direct <input type="checkbox"/> Candidate Loan <input checked="" type="checkbox"/> Direct from a person or authorized entity Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan from lending institution <input type="checkbox"/> Misc. (Specify) _____			\$432.=		
Contributions: <input type="checkbox"/> Candidates Direct <input type="checkbox"/> Candidate Loan <input type="checkbox"/> Direct from a person or authorized entity Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan from lending institution <input type="checkbox"/> Misc. (Specify) _____					
Contributions: <input type="checkbox"/> Candidates Direct <input type="checkbox"/> Candidate Loan <input type="checkbox"/> Direct from a person or authorized entity Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan from lending institution <input type="checkbox"/> Misc. (Specify) _____					
Contributions: <input type="checkbox"/> Candidates Direct <input type="checkbox"/> Candidate Loan <input type="checkbox"/> Direct from a person or authorized entity Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan from lending institution <input type="checkbox"/> Misc. (Specify) _____					
Contributions: <input type="checkbox"/> Candidates Direct <input type="checkbox"/> Candidate Loan <input type="checkbox"/> Direct from a person or authorized entity Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan from lending institution <input type="checkbox"/> Misc. (Specify) _____					
Contributions: <input type="checkbox"/> Candidates Direct <input type="checkbox"/> Candidate Loan <input type="checkbox"/> Direct from a person or authorized entity Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan from lending institution <input type="checkbox"/> Misc. (Specify) _____					
Contributions: <input type="checkbox"/> Candidates Direct <input type="checkbox"/> Candidate Loan <input type="checkbox"/> Direct from a person or authorized entity Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan from lending institution <input type="checkbox"/> Misc. (Specify) _____					
Subtotal This Page		-0-	\$432.=		
Total This Period (only on last page of this schedule)		-0-	432.=		



Kentucky Registry of Election Finance
1604 Louisville Road
Frankfort, Kentucky 40601
(502) 344-7724

DISBURSEMENTS SCHEDULE 2

1. Name of Candidate	2. Committee Name	3. This Statement Covers	4. Name and Address of person to whom paid (if over \$25.00, disbursement must be made by check. Persons transporting voters to the polls must be paid by check).	5. Purpose (be specific, \$25.00 or less show purpose, date and amount only).	6. Date	7. Amount Disbursed
N/A	Freedom's Heritage Forum	From Oct 1 90 Mo. Day Yr. To Dec 31 90 Mo. Day Yr.	Mitch McConnell	Campaign Contribution, U.S. Senate	10/12/90	135.-
			Deborah Jensen	" " State Representative	10/12/90	482.50
			Tim Philpot	" " State Senate	10/12/90	62.50
			Mitch McConnell	" " U.S. Senate	10/25/90	36.67
			Deborah Jensen	" " State Rep.	10/25/90	36.67
			Tim Philpot	" " State Senate	10/25/90	36.66
			Louisville Letter Service	Mailing	10/26/90	560.-
			Louisville Letter Service	Mailing	11/18/90	1401.36

Subtotal This Page

2751.36
2751.36

Total This Period (only on last page of this schedule)



Kentucky Registry of Election Finance

1604 Louise Ave Road

Franklin, Kentucky/ 40601

15021 564-2226

**FUND RAISERS
SCHEDULE 4**

1. Name of Candidate	N A																
2. Committee Name	Freedom's Heritage Forum																
3. This Statement Covers	<table border="1"> <tr> <td>From</td> <td>Oct</td> <td>1</td> <td>90</td> </tr> <tr> <td>Mo.</td> <td></td> <td>Day</td> <td>Yr.</td> </tr> <tr> <td>To</td> <td>Dec</td> <td>31</td> <td>90</td> </tr> <tr> <td>Mo.</td> <td></td> <td>Day</td> <td>Yr.</td> </tr> </table>	From	Oct	1	90	Mo.		Day	Yr.	To	Dec	31	90	Mo.		Day	Yr.
From	Oct	1	90														
Mo.		Day	Yr.														
To	Dec	31	90														
Mo.		Day	Yr.														

[illegible]

NOTE: Individual Entries on this schedule recap information reported in other schedules being filed. This schedule is not to be filed separately but must be included with the Election Finance Statement covering the period in which the fund raising activity took place.



Kentucky Registry of Election Finance
1604 Louisville Road
Frankfort, Kentucky 40601
(502) 564-2226

ELECTION FINANCE STATEMENT

COVER PAGE

1. Candidate Name Office Sought/Dist. No. County of Residence Political Party	} N/A
2. Committee Name Supporting various candidates Office Sought/Dist. No. N/A	

3. Candidate/Committee Mailing Address PO Box 6689 Louisville, Ky. 40207 Area Code/Phone (502) 895-6263	4. Treasurer's Name and Mailing Address Jean Stultz PO Box 6689 Louisville, Ky. 40207 Area Code/Phone (502) 895-6263	5. This Statement Covers From <u>June</u> 30 90 Mo. Day Yr. To <u>Sept.</u> 30 90 Mo. Day Yr.
--	--	---

TYPE OF STATEMENT

6a. <input type="checkbox"/> Pre-election (Quarterly Preceding)	Pre-election, Post Election or Supplemental statement relates to:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Special	Mo. Day Yr.
b. <input type="checkbox"/> Pre-election (32nd day preceding)			
c. <input type="checkbox"/> Pre-election (12th day preceding)			
d. <input type="checkbox"/> Post Election (30th day following)			
e. <input type="checkbox"/> Post Election Supplemental (60th day following)			
f. <input checked="" type="checkbox"/> Quarterly (Permanent Committee)			
g. <input type="checkbox"/> Semi-annual Supplemental (Opposed candidate in last election)			
h. <input type="checkbox"/> Annual Supplemental (Unopposed candidate in last election)			
i. <input type="checkbox"/> Termination	Mo. Day Yr.		
j. <input type="checkbox"/> Amendment - check one of the items above to indicate which statement is being amended.			

7. Verification: Certify that all reasonable diligence was used in the preparation of this Statement and attached schedule (if any) and to the best of my/our knowledge and belief the contents are true, accurate and complete.

President Frank G. Simon, MD Date Sept. 30 90
Type or Print Name
Signature Frank G. Simon, MD Mo. Day Yr.

RECEIVED
K. R. R. F.
OCT 2 1 20 PM '90
JTC

23250274082

SUMMARY PAGE

Candidate/Committee Frederick's Heritage Forum

Period From June 30, 1990 To Sept. 30, 1990

RECEIPTS

1. CONTRIBUTIONS:

- a. Itemized by check or written instrument (Schedule 1, Item 7a)
- b. Other receipts (Schedule 1, Item 7b)
- c. Receipts in currency (Number of people _____)
Individual cash contribution limit is \$100
- d. Unitemized contributions (Number of people 83)
Contributions by check of \$300 or less.
2. TOTAL RECEIPTS

DISBURSEMENTS

3. TOTAL DISBURSEMENTS (Schedule 2, Item 7)

BALANCE STATEMENT

4. Ending balance of last report (Enter (-) if no report has been filed)
5. Amount received during reporting period (Line 2, Column 1)
6. SubTotal (Add Lines 4 and 5)
7. Amount disbursed during reporting period (Line 3, Column 1)
8. ENDING BALANCE (Subtract Line 7 from Line 6)
9. Debts and Obligations owed BY: (Schedule 5, Item 11)
10. Debts and Obligations owed TO: (Schedule 5, Item 11)

COLUMN I
THIS
PERIOD

COLUMN II
CUMULATIVE
THIS ELECTION

THIS
PERIOD

CUMULATIVE
THIS ELECTION

11. In-Kind Contributions Received (Schedule 3, Item 7)
12. Fund Raisers (Schedule 4, Item 10)

\$ 00

\$ 3,030.37 (Net income = 87.60)

+\$ 00

+\$ 00

+\$ 00

+\$ 4,915.06

=\$ 4,915.06

\$ 2,953.42

+\$ 50.23

+\$ 4,915.06

=\$ 4,965.29

-\$ 2,953.42

=\$ 2,011.87

\$ 00

\$ 00

\$

\$

\$



Kentucky Registry of Election Finance
1604 Louisville Road
Frankfort, Kentucky 40601
(502) 564-2225

ITEMIZED RECEIPTS
SCHEDULE 1

1. Name of Candidate		2. Committee Name		3. This Statement Covers			
N/A		Freedom's Heritage Forum		From <u>June</u> <u>30</u> <u>90</u> Mo. Day Yr. To <u>Sept</u> <u>30</u> <u>90</u> Mo. Day Yr.			
4a. Name and Address from whom received Enter age if not 18 by date of General Election.	4b. AGE	5. Type of Contribution or Other Receipt	6. Date of Receipt	7a. Contributions Check or Written Instrument	7b. Other Receipts	8. Cumulative for election	9. Contributor Occupation (Be Specific)
		Contributions: <input type="checkbox"/> Candidate Direct <input type="checkbox"/> Candidate Loan <input checked="" type="checkbox"/> Direct from a person or authorized entity Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan from lending institution <input type="checkbox"/> Misc. (Specify) _____					
		Contributions: <input type="checkbox"/> Candidate Direct <input type="checkbox"/> Candidate Loan <input type="checkbox"/> Direct from a person or authorized entity Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan from lending institution <input type="checkbox"/> Misc. (Specify) _____					
		Contributions: <input type="checkbox"/> Candidate Direct <input type="checkbox"/> Candidate Loan <input type="checkbox"/> Direct from a person or authorized entity Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan from lending institution <input type="checkbox"/> Misc. (Specify) _____					
		Contributions: <input type="checkbox"/> Candidate Direct <input type="checkbox"/> Candidate Loan <input type="checkbox"/> Direct from a person or authorized entity Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan from lending institution <input type="checkbox"/> Misc. (Specify) _____					
		Contributions: <input type="checkbox"/> Candidate Direct <input type="checkbox"/> Candidate Loan <input type="checkbox"/> Direct from a person or authorized entity Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan from lending institution <input type="checkbox"/> Misc. (Specify) _____					
		Contributions: <input type="checkbox"/> Candidate Direct <input type="checkbox"/> Candidate Loan <input type="checkbox"/> Direct from a person or authorized entity Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan from lending institution <input type="checkbox"/> Misc. (Specify) _____					
		Contributions: <input type="checkbox"/> Candidate Direct <input type="checkbox"/> Candidate Loan <input type="checkbox"/> Direct from a person or authorized entity Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan from lending institution <input type="checkbox"/> Misc. (Specify) _____					
		Contributions: <input type="checkbox"/> Candidate Direct <input type="checkbox"/> Candidate Loan <input type="checkbox"/> Direct from a person or authorized entity Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan from lending institution <input type="checkbox"/> Misc. (Specify) _____					
		Contributions: <input type="checkbox"/> Candidate Direct <input type="checkbox"/> Candidate Loan <input type="checkbox"/> Direct from a person or authorized entity Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan from lending institution <input type="checkbox"/> Misc. (Specify) _____					

Subtotal This Page

Total This Period (only on last page of this schedule)

Enter this total on line 1a of Summary Page

Enter this total on line 1b of Summary Page

59330277032



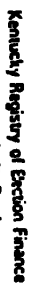
Kentucky Registry of Election Finance
1604 Louisville Road
Frankfort, Kentucky 40601
(502) 564-2726

DISBURSEMENTS
SCHEDULE 2

1. Name of Candidate	N/A	2. Committee Name	3. This Statement Covers	
4. Name and Address of person to whom paid (if over \$25.00, disbursement must be made by check. Persons transporting voters to the polls must be paid by check).		5. Purpose (be specific, \$25.00 or less show purpose, date and amount only).	6. Date	7. Amount Disbursed
Ameri-Call 10000 Shelbyville Rd Louisville, Ky.		Phone calls		\$ 10.65
Mr. Harry Kuterian Louisville, Ky. 40229		Buy diet cookies (See Fund Raiser)		2,942.77

Subtotal This Page
2953.42
2,953.42

99EE027P082



1804 LOUISIANA ROAD
FRANKFORT, KENTUCKY 40601
15021 564-2225

**FUND RAISERS
SCHEDULE 4**

1. Name of Candidate	N A	2. Committee Name	Freedom's Heritage Forum	3. This Statement Covers	From <u>June</u> <u>30</u> <u>90</u> Mo. Day Yr. To <u>Sept</u> <u>30</u> <u>90</u> Mo. Day Yr.
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[illegible]

NOTE: Individual Entries on this schedule recap information reported in other schedules being filed. This schedule is not to be filed separately but must be included with the Election Finance Statement covering the period in which the fund raising activity took place.

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Kentucky Registry of Election Finance
1604 Louisville Road
Frankfort, Kentucky 40501
(502) 564-2226

ELECTION FINANCE STATEMENT

COVER PAGE

1. Candidate Name Office Sought/Dist. No. County of Residence Political Party	} N A
2. Committee Name Supporting various candidates Office Sought/Dist. No.	

3. Candidate/Committee Mailing Address PO Box 6689 Louisville, Ky. 40207 Area Code/Phone (502) 895-6263	4. Treasurer's Name and Mailing Address Jean Stultz PO Box 6689 Louisville, Ky. 40207 Area Code/Phone (502) 895-6263	5. This Statement Covers From April 1 90 To June 30 90
--	--	--

TYPE OF STATEMENT

- 6a. ☐ Pre-election (Quarterly Preceding)
- 6b. ☐ Pre-election (32nd day preceding)
- 6c. ☐ Pre-election (12th day preceding)
- 6d. ☐ Post Election (30th day following)
- 6e. ☐ Post Election Supplemental (60th day following)
- 6f. ☒ Quarterly (Permanent Committee)
- 6g. ☐ Semi-annual Supplemental (Opposed candidate in last election)
- 6h. ☐ Annual Supplemental (Unopposed candidate in last election)
- 6i. ☐ Termination
- 6j. ☐ Amendment - check one of the items above to indicate which statement is being amended.

7. Verification: Certify that all reasonable diligence was used in the preparation of this Statement and attached schedule (if any) and to the best of my/our knowledge and belief the contents are true, accurate and complete.

President
Type or Print Name
Frank G. Simon, MD
Signature
Frank G. Simon, MD
Date
June 30, 1990

RECEIVED
K.R.E.F.
JUL 2 10 51 AM '90

OFFICE USE ONLY

8955027F082

SUMMARY PAGE

Candidate/Committee Freedom's Heritage Forum

Period From April 1, 1990 To June 30, 1990

RECEIPTS

COLUMN I
THIS
PERIOD
COLUMN II
CUMULATIVE
THIS ELECTION

1. CONTRIBUTIONS:

a. Itemized by check or written instrument (Schedule 1, Item 7a)	+\$ <u>1,200.00</u>	\$ _____
b. Other receipts (Schedule 1, Item 7b)	+\$ _____	\$ _____
c. Receipts in currency (Number of people _____) Individual cash contribution limit is \$100	+\$ _____	\$ _____
d. Unitemized contributions (Number of people <u>115</u>) Contributions by check of \$300 or less.	+\$ <u>1,093.33</u>	\$ _____
2. TOTAL RECEIPTS	=\$ <u>2,293.33</u>	\$ _____

DISBURSEMENTS

3. TOTAL DISBURSEMENTS (Schedule 2, Item 7)	\$ <u>2,558.39</u>	\$ _____
---	--------------------	----------

BALANCE STATEMENT

4. Ending balance of last report (Enter (-O-) if no report has been filed)	+\$ <u>315.29</u>	
5. Amount received during reporting period (Line 2, Column 1)	+\$ <u>2,293.33</u>	
6. Sub-Total (Add Lines 4 and 5)	=\$ <u>2,608.62</u>	
7. Amount disbursed during reporting period (Line 3, Column 1)	-\$ <u>2,558.39</u>	
8. ENDING BALANCE (Subtract Line 7 from Line 6)	=\$ <u>50.23</u>	

9. Debts and Obligations owed BY: (Schedule 5, Item 11)	\$ <u>0.00</u>	
10. Debts and Obligations owed TO: (Schedule 5, Item 11)	\$ <u>0.00</u>	

THIS
PERIOD
CUMULATIVE
THIS ELECTION

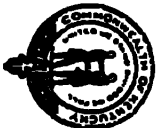
11. In-Kind Contributions Received (Schedule 3, Item 7)	\$ <u>0.00</u>	\$ _____
12. Fund Raisers (Schedule 4, Item 10)	\$ <u>0.00</u>	\$ _____

89550275037



ITEMIZED RECEIPTS
SCHEDULE 1

1. Name of Candidate		N/A					
2. Committee Name		Freedom's Heritage Forum					
3. This Statement Covers		From April 1 90 To June 30 90					
4a. Name and Address from whom received Enter age if not 18 by date of General Election.	4b. AGE	5. Type of Contribution or Other Receipt	6. Date of Receipt	AMOUNT		8. Cumulative for election	9. Contributor Occupation (Be Specific)
Frank G. Simon PO Box 6689 Louisville, Ky. 40207	51	Contributions: <input checked="" type="checkbox"/> Candidate Direct <input type="checkbox"/> Candidate Loan <input checked="" type="checkbox"/> Direct from a person or authorized entity Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan from lending institution <input type="checkbox"/> Misc. (Specify) _____	5/31/90	7a. Contributions Check or Written Instrument	7b. Other Receipts	\$1,200.	Physician
		Contributions: <input type="checkbox"/> Candidate Direct <input type="checkbox"/> Candidate Loan <input type="checkbox"/> Direct from a person or authorized entity Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan from lending institution <input type="checkbox"/> Misc. (Specify) _____					
		Contributions: <input type="checkbox"/> Candidate Direct <input type="checkbox"/> Candidate Loan <input type="checkbox"/> Direct from a person or authorized entity Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan from lending institution <input type="checkbox"/> Misc. (Specify) _____					
		Contributions: <input type="checkbox"/> Candidate Direct <input type="checkbox"/> Candidate Loan <input type="checkbox"/> Direct from a person or authorized entity Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan from lending institution <input type="checkbox"/> Misc. (Specify) _____					
		Contributions: <input type="checkbox"/> Candidate Direct <input type="checkbox"/> Candidate Loan <input type="checkbox"/> Direct from a person or authorized entity Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan from lending institution <input type="checkbox"/> Misc. (Specify) _____					
		Contributions: <input type="checkbox"/> Candidate Direct <input type="checkbox"/> Candidate Loan <input type="checkbox"/> Direct from a person or authorized entity Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan from lending institution <input type="checkbox"/> Misc. (Specify) _____					
Subtotal This Page				\$1,200.00			
Total This Period (only on last page of this schedule)				\$1,200.00			



Kentucky Registry of Election Finance
1604 Louisville Road
Frankfort, Kentucky 40601
(502) 694-2226

ELECTION FINANCE STATEMENT

COVER PAGE

1. Candidate Name	} N/A
Office Sought/Dist. No.	
County of Residence	
Political Party	
2. Committee Name	Christian Coalition PAC
Supporting	
Office Sought/Dist. No.	} N/A

RECEIVED
K.R.E.F.
APR 6 10 05 AM '90
OFFICE USE ONLY
Was American Coalition for Traditional Values PAC

3. Candidate/Committee Mailing Address PO Box 6689 Louisville, Ky. 40207 Area Code/Phone	4. Treasurer's Name and Mailing Address Frank G. Simon, MD PO Box 6689 Louisville, Ky. 40207 Area Code/Phone (502) 895-6263	5. This Statement Covers From Jan 1 90 Mo Day Yr. To March 31 90 Mo Day Yr.
---	---	---

TYPE OF STATEMENT

6a. <input type="checkbox"/> Pre-election (Quarterly Preceding)	Pre-election, Post Election or Supplemental statement relates to:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Special	Date of Election Mo Day Yr.
b. <input type="checkbox"/> Pre-election (32nd day preceding)			
c. <input type="checkbox"/> Pre-election (12th day preceding)			
d. <input type="checkbox"/> Post Election (30th day following)			
e. <input type="checkbox"/> Post Election Supplemental (60th day following)			
f. <input checked="" type="checkbox"/> Quarterly (Permanent Committee)			
g. <input type="checkbox"/> Semi-annual Supplemental (Opposed candidate in last election)			
h. <input type="checkbox"/> Annual Supplemental (Unopposed candidate in last election)			
i. <input type="checkbox"/> Termination	Mo Day Yr.		
j. <input type="checkbox"/> Amendment - check one of the items above to indicate which statement is being amended.			

7. Verification: Certify that all reasonable diligence was used in the preparation of this Statement and attached schedule (if any) and to the best of my/our knowledge and belief the contents are true, accurate and complete.

Treasurer: Frank G. Simon, MD	Signature: Frank G. Simon, MD	Date: Mo Day Yr.
-------------------------------	-------------------------------	------------------

02250277032

SUMMARY PAGE

Candidate/Committee Christian Coalition PAC

Period From Jan 1, 1990 To March 31, 1990

RECEIPTS

COLUMN I
THIS
PERIOD
COLUMN II
CUMULATIVE
THIS ELECTION

1. CONTRIBUTIONS:

a. Itemized by check or written instrument (Schedule 1, Item 7a)	+\$ 1,150.00	
b. Other receipts (Schedule 1, Item 7b)	+\$ 0.00	
c. Receipts in currency (Number of people _____) Individual cash contribution limit is \$100	+\$ 0.00	\$
d. Unitemized contributions (Number of people <u>4</u>) Contributions by check of \$300 or less.	+\$ 268.04	
2. TOTAL RECEIPTS	= \$ 1,418.04	\$

DISBURSEMENTS

3. TOTAL DISBURSEMENTS (Schedule 2, Item 7)	\$ 1,262.19	\$
---	-------------	----

BALANCE STATEMENT

4. Ending balance of last report (Enter (-)- if no report has been filed)	+\$ 159.44	
5. Amount received during reporting period (Line 2, Column 1)	+\$ 1,418.04	
6. Sub-Total (Add Lines 4 and 5)	= \$ 1,577.48	
7. Amount disbursed during reporting period (Line 3, Column 1)	-\$ 1,262.19	
8. ENDING BALANCE (Subtract Line 7 from Line 6)	= \$ 315.29	
9. Debts and Obligations owed BY: (Schedule 5, Item 11)	\$ 0.00	
10. Debts and Obligations owed TO: (Schedule 5, Item 11)	\$ 0.00	
11. In-Kind Contributions Received (Schedule 3, Item 7)	\$ 0.00	\$
12. Fund Raisers (Schedule 4, Item 10)	\$ 0.00	

THIS
PERIOD
CUMULATIVE
THIS ELECTION

3233077082



Kentucky Registry of Election Finance
1604 Louisville Road
Frankfort, Kentucky 40601
(502) 564-2226

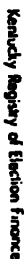
ITEMIZED RECEIPTS SCHEDULE 1

1. Name of Candidate		N/A	
2. Committee Name		Christian Coalition PAC	
3. This Statement Covers		From 1/1/90 To 3/31/90	
4a. Name and Address from which received Enter age if not 18 by date of General Election.		4b. AGE	5. Type of Contribution or Other Receipt
Frank G. Simon, MD PO Box 6689 Louisville, Ky. 40207		50	Contributions: <input checked="" type="checkbox"/> Candidate Direct <input type="checkbox"/> Candidate Loan <input checked="" type="checkbox"/> Direct from a person or authorized entity Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan from lending institution <input type="checkbox"/> Misc. (Specify) _____
6. Date of Receipt		7a. Contributions Check or Written Instrument	
1/4/90		1,150. =	
8. Cumulative for election		9. Contributor Occupation (Be Specific)	
1,150. =		Physician	

Subtotal This Page
Total This Period (only on last page of this schedule)

\$1,150. =	- 0 -
\$1,150. =	- 0 -

7433027092



1604 Louisville Road
Frankfort, Kentucky 40601

**DISBURSEMENTS
SCHEDULE 2**

Kentucky Registry of Campaign Finance
1604 Louisville Road
Franklin, Kentucky 40601
(502) 564-2226

DISBURSEMENTS SCHEDULE 2

4. Name and Address of person to whom paid (if over \$25.00, disbursement must be made by check. Persons transporting voters to the polls must be paid by check).

Louisville Letter Service
Pinewood Rd
Louisville, Ky.

5. Purpose (be specific, \$25.00 or less show purpose, date and amount only).

Printing and mailing

6. Date

1/4/90

7. Amount Disbursed

1,262.19

1. Name of Candidate N/A

2. Committee Name
Christian Coalition Inc

3. This Statement Covers
From 1/1/90 To 3/31/90

Subtotal This Page

\$ 1,262.19

Total This Period (only on last page of this schedule)

\$ 1,262.19



Kentucky Registry of Election Finance
1504 Louisville Road
Frankfort, Kentucky 40601
(502) 564-2226

CAMPAIGN STATEMENT COVER PAGE

OFFICE USE ONLY

Jul 3 1 34 PM '90

1. Candidate Name Office Sought/Dist. No. County of Residence Political Party	} NA
2. Committee Name Supporting Office Sought/Dist. No.	

American Coalition for
Trade Reform
PAC

3. Candidate/Committee Mailing Address PO Box 6689 Louisville, Ky. 40207 Area Code/Phone	4. Treasurer's Name and Mailing Address Frank G. Simon, MD PO Box 6689 Louisville, Ky. 40207 Area Code/Phone	5. This Statement Covers From 9 30 89 mo day yr To 12 31 89 mo day yr
---	--	---

TYPE OF STATEMENT

6a. ☐ Pre-election (Quarterly Preceding)

b. ☐ Pre-election (32nd day preceding)

c. ☐ Pre-election (12th day preceding)

d. ☐ Post Election (30th day following)

e. ☐ Post Election Supplemental (60th day following)

f. ☒ Quarterly (Permanent Committee)

g. ☐ Semi-annual Supplemental

h. ☐ Annual Supplemental

i. ☐ Dissolution

Date of Resolution

Mo Day Yr

j. ☐ Amendment - check one of the items above to indicate which statement is being amended.

7. Verification: Certify that all reasonable diligence was used in the preparation of this Statement and attached schedule (if any) and to the best of my/our knowledge and belief the contents are true, accurate and complete.

Treasurer	Frank G. Simon, MD	Signature	Frank G. Simon	Date	1 4 90
	Type or Print Name			Mo Day Yr	

94250775087



Kentucky Registry of Election Finance

1604 Louisville Road
Frankfort, Kentucky 40601
(502) 564-2226

ITEMIZED RECEIPTS SCHEDULE 1

1. Name of Candidate **N/A**

2. Committee Name **American
Coalition for Traditional
Values PAC**

3. This Statement Covers
From 9 30 99
mo day yr
To 12 31 89
mo day yr

4a. Name and Address from whom received	4b. AGE	5. Type of Contribution or Other Receipt	6. Date of Receipt	AMOUNT			8. Cumulative for election	9. Contributor Occupation
				7a. Contributions of Money	7b. In-Kind Contributions Received	7c. Other Receipts		
Frank C. Simon	50	Contributions: <input type="checkbox"/> Candidate or Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> In-Kind (describe) _____ Other Receipts <input type="checkbox"/> Interest <input type="checkbox"/> Loan from lending institution <input type="checkbox"/> Misc. (Specify) _____	10/27/89	\$1,000.00			1,000.00	Physician
Frank C. Simon	50	Contributions: <input type="checkbox"/> Candidate or Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> In-Kind (describe) _____ Other Receipts <input type="checkbox"/> Interest <input type="checkbox"/> Loan from lending institution <input type="checkbox"/> Misc. (Specify) _____	11/1/89	4450.00				
		Contributions: <input type="checkbox"/> Candidate or Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> In-Kind (describe) _____ Other Receipts <input type="checkbox"/> Interest <input type="checkbox"/> Loan from lending institution <input type="checkbox"/> Misc. (Specify) _____						
		Contributions: <input type="checkbox"/> Candidate or Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> In-Kind (describe) _____ Other Receipts <input type="checkbox"/> Interest <input type="checkbox"/> Loan from lending institution <input type="checkbox"/> Misc. (Specify) _____						
		Contributions: <input type="checkbox"/> Candidate or Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> In-Kind (describe) _____ Other Receipts <input type="checkbox"/> Interest <input type="checkbox"/> Loan from lending institution <input type="checkbox"/> Misc. (Specify) _____						
		Contributions: <input type="checkbox"/> Candidate or Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> In-Kind (describe) _____ Other Receipts <input type="checkbox"/> Interest <input type="checkbox"/> Loan from lending institution <input type="checkbox"/> Misc. (Specify) _____						

Subtotal This Page

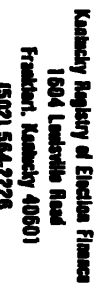
Total This Period (only on last page of this schedule)

Enter this total on line

Enter this total on line

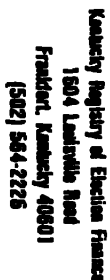
Enter this total on line

22350277082



1. Name of Candidate	N/A												
2. Committee Name	American Coalition for Traditional Values PAC												
3. This Statement Covers	<table border="1"> <tr> <td>From</td> <td>9/10</td> <td>89</td> </tr> <tr> <td>mo</td> <td>day</td> <td>yr</td> </tr> <tr> <td>To</td> <td>12/31</td> <td>89</td> </tr> <tr> <td>mo</td> <td>day</td> <td>yr</td> </tr> </table>	From	9/10	89	mo	day	yr	To	12/31	89	mo	day	yr
From	9/10	89											
mo	day	yr											
To	12/31	89											
mo	day	yr											

Total This Period (only on last page of this schedule)



DEBTS AND OBLIGATIONS

SCHEDULE 3

1. Name of Candidate	N/A																
2. Committee Name	American Coalition for Traditional Values PAC																
3. This Statement Covers	<table border="1"> <tr> <td>From</td> <td>9</td> <td>30</td> <td>89</td> </tr> <tr> <td>mo</td> <td></td> <td>day</td> <td>yr</td> </tr> <tr> <td>To</td> <td>12</td> <td>31</td> <td>89</td> </tr> <tr> <td>mo</td> <td></td> <td>day</td> <td>yr</td> </tr> </table>	From	9	30	89	mo		day	yr	To	12	31	89	mo		day	yr
From	9	30	89														
mo		day	yr														
To	12	31	89														
mo		day	yr														

[illegible]

This Schedule must be filed with every Campaign Statement up to and including the period in which all debts are repaid or otherwise satisfied.

**Total This Period (Complete only on last page of this part
number as checked above)**

Page _____ of _____

Enter the total on Line 4 "Owed by" or Line 5 "Owed"



Kentucky Registry at Election Finance
1804 Louisville Road
Frankfort, Kentucky 40601
(502) 564-2226

CAMPAIGN STATEMENT COVER PAGE

1. Candidate Name

Office Sought/Dist. No. } NA
County of Residence }
Political Party }

2. Committee Name

Supporting } NA
Office Sought/Dist. No. }
American Coalition for
Traditional Values PAC

3. Candidate/Committee Mailing Address

PO Box 6689
Louisville, Ky. 40207

Area Code/Phone

4. Treasurer's Name and Mailing Address

Frank G. Simon, MD
PO Box 6689
Louisville, Ky. 40207

Area Code/Phone

5. This Statement Covers

From 6/30/89
To 9/30/89
mo day yr
mo day yr

TYPE OF STATEMENT

6a. ☐ Pre-election (Quarterly Preceding)

b. ☐ Pre-election (32nd day preceding)

c. ☐ Pre-election (12th day preceding)

d. ☐ Post Election (30th day following)

e. ☐ Post Election Supplemental (60th day following)

f. ☒ Quarterly (Permanent Committee)

g. ☐ Semi-annual Supplemental

h. ☐ Annual Supplemental

i. ☐ Dissolution

Date of Dissolution

Mo Day Yr

j. ☐ Amendment - check one of the items above to indicate which statement is being amended.

7. Verification: Certify that all reasonable diligence was used in the preparation of this Statement and attached schedule (if any) and to the best of my/our knowledge and belief the contents are true, accurate and complete.

Treasurer

Frank G. Simon, MD

Frank G. Simon

Date 10/10/89
Mo Day Yr

OFFICE USE ONLY

OCT 13 1 53 PM '89

RECORDED
INDEXED

08EE0277082

Candidate/Committee American Coalition for Traditional Values Inc

Period From 6/30/89 To 9/30/89

RECEIPTS

1. CONTRIBUTIONS:

	COLUMN I THIS PERIOD	COLUMN II CUMULATIVE THIS ELECTION
a. Itemized (Schedule 1, Item 7a)	+\$ 7.54	
b. Unitemized Contributions (Number of People <u> </u>)	+\$ 0.00	
c. In-Kind Contributions Received (Schedule 1, Item 7b)	+\$ 0.00	
d. Other Receipts (Schedule 1, Item 7c)	+\$ 0.00	
2. TOTAL RECEIPTS	=\$ 7.54	\$ 7.54

DISBURSEMENTS

3. TOTAL DISBURSEMENTS (Schedule 2, Item 7)

\$ 0.00

\$ 0.00

4. Debts and Obligations owed BY: (Schedule 3, Item 10)	\$ 0.00
5. Debts and Obligations owed TO: (Schedule 3, Item 10)	\$ 0.00

BALANCE STATEMENT

6. Ending balance of last report (Enter (-) if no report has been filed)	+\$ 7.54
7. Amount received during reporting period (Line 2, Column 1)	+\$ 0.00
8. Sub-Total (Add Lines 6 and 7)	=\$ 7.54
9. Amount disbursed during reporting period (Line 3, Column 1)	-\$ 0.00
10. ENDING BALANCE (Subtract Line 9 from 8)	=\$ 7.54



Kentucky Registry of Election Finance
1504 Louisville Road
Frankfort, Kentucky 40601
(502) 564-2225

CAMPAIGN STATEMENT COVER PAGE

RECEIVED
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Jul 7 1 22 PM '89

1. Candidate Name Office Sought/Dist. No. } <i>NA</i> County of Residence } Political Party }		2. Committee Name <i>American Coalition for</i> Supporting <i>Traditional Values</i> Office Sought/Dist. No. } <i>NA</i>	
3. Candidate/Committee Mailing Address <i>PO Box 6689</i> <i>Louisville, Ky. 40207</i> Area Code/Phone		4. Treasurer's Name and Mailing Address <i>Frank G. Simon, MD</i> <i>PO Box 6689</i> <i>Louisville, Ky. 40207</i> Area Code/Phone	
TYPE OF STATEMENT 6a. <input type="checkbox"/> Pre-election (Quarterly Preceding) b. <input type="checkbox"/> Pre-election (32nd day preceding) c. <input type="checkbox"/> Pre-election (12th day preceding) d. <input type="checkbox"/> Post Election (30th day following) e. <input type="checkbox"/> Post Election Supplemental (60th day following) f. <input checked="" type="checkbox"/> Quarterly (Permanent Committee) g. <input type="checkbox"/> Semi-annual Supplemental h. <input type="checkbox"/> Annual Supplemental i. <input type="checkbox"/> Dissolution Date of Statement Mo Day Yr		Pre-election, Post Election or Supplemental statement relates to: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Special Date of Election Mo Day Yr	
7. Verification: Certify that all reasonable diligence was used in the preparation of this Statement and attached schedule (if any) and to the best of my/our knowledge and belief the contents are true, accurate and complete. Treasurer <u><i>Frank G. Simon, MD</i></u> Date <u><i>7</i></u> <u><i>6</i></u> <u><i>89</i></u> Type or Print Name Signature Mo Day Yr		5. This Statement Covers From <u><i>3</i></u> <u><i>31</i></u> <u><i>89</i></u> mo day yr To <u><i>7</i></u> <u><i>1</i></u> <u><i>89</i></u> mo day yr	

28330274082

S U M M A R Y P A G E

Candidate/Committee American Coalition for Traditional Values Inc

Period From 3/31/89 To 2/1/99

RECEIPTS

1. CONTRIBUTIONS:

a. Itemized (Schedule 1, Item 7a) +\$ -0-

b. Unitemized Contributions (Number of People) +\$ 275. =

c. In-Kind Contributions Received (Schedule 1, Item 7b) +\$ -0-

d. Other Receipts (Schedule 1, Item 7c) +\$ -0-

2. TOTAL RECEIPTS

=\$ 275. =

DISBURSEMENTS

3. TOTAL DISBURSEMENTS (Schedule 2, Item 7)

\$ 776. =

4. Debts and Obligations owed BY: (Schedule 3, Item 10)

\$ -0-

5. Debts and Obligations owed TO: (Schedule 3, Item 10)

\$ -0-

BALANCE STATEMENT

6. Ending balance of last report (Enter (-0-) if no report has been filed) +\$ 508.54

7. Amount received during reporting period (Line 2, Column 1) +\$ 275. =

8. Sub-Total (Add Lines 6 and 7) =\$ 783.54

9. Amount disbursed during reporting period (Line 3, Column 1) -\$ 776. =

10. ENDING BALANCE (Subtract Line 9 from 8) =\$ 7.54

COLUMN I
THIS
PERIOD

COLUMN II
CUMULATIVE
THIS
ELECTION

58330277082



Kentucky Registry of Election Finance

1804 Lakeside Road
Frankfort, Kentucky 40601
(502) 564-2226

ITEMIZED RECEIPTS SCHEDULE 1

1. Name of Candidate

N/A

2. Committee Name
*American
Coalition for Traditional
Values PAC*

3. This Statement Covers

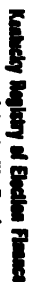
From 3 31 89
mo day yr
To 7 1 89
mo day yr

4a. Name and Address from whom received	4b. AGE	5. Type of Contribution or Other Receipt	6. Date of Receipt	AMOUNT			8. Cumulative for election	9. Contributor Occupation
				7a. Contributions of Money	7b. In-Kind Contributions Received	7c. Other Receipts		
		Contributions: <input type="checkbox"/> Candidate <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> In-Kind (describe) _____ Other Receipts <input type="checkbox"/> Interest <input type="checkbox"/> Loan from lending institution <input type="checkbox"/> Misc. (Specify) _____						
		Contributions: <input type="checkbox"/> Candidate <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> In-Kind (describe) _____ Other Receipts <input type="checkbox"/> Interest <input type="checkbox"/> Loan from lending institution <input type="checkbox"/> Misc. (Specify) _____						
		Contributions: <input type="checkbox"/> Candidate <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> In-Kind (describe) _____ Other Receipts <input type="checkbox"/> Interest <input type="checkbox"/> Loan from lending institution <input type="checkbox"/> Misc. (Specify) _____						
		Contributions: <input type="checkbox"/> Candidate <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> In-Kind (describe) _____ Other Receipts <input type="checkbox"/> Interest <input type="checkbox"/> Loan from lending institution <input type="checkbox"/> Misc. (Specify) _____						
		Contributions: <input type="checkbox"/> Candidate <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> In-Kind (describe) _____ Other Receipts <input type="checkbox"/> Interest <input type="checkbox"/> Loan from lending institution <input type="checkbox"/> Misc. (Specify) _____						
		Contributions: <input type="checkbox"/> Candidate <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> In-Kind (describe) _____ Other Receipts <input type="checkbox"/> Interest <input type="checkbox"/> Loan from lending institution <input type="checkbox"/> Misc. (Specify) _____						
		Contributions: <input type="checkbox"/> Candidate <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> In-Kind (describe) _____ Other Receipts <input type="checkbox"/> Interest <input type="checkbox"/> Loan from lending institution <input type="checkbox"/> Misc. (Specify) _____						
		Contributions: <input type="checkbox"/> Candidate <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> In-Kind (describe) _____ Other Receipts <input type="checkbox"/> Interest <input type="checkbox"/> Loan from lending institution <input type="checkbox"/> Misc. (Specify) _____						

Subtotal This Page

Total This Period (only on last page of this schedule)

78550277082



**1804 Louisville Road
Frankfort, Kentucky 40601
(502) 564-2226**

DISBURSEMENTS SCHEDULE 2

1. Name of Candidate	N/A
2. Committee Name	American Coalition for Traditional Values PAC
3. This Statement Covers	
From	3/1/89
mo	day
yr	
To	7/1/89
mo	day
yr	

[illegible]

Subtotal This Page

776.-

Total This Period (only on last page of this schedule)

776.



Kentucky Registry of Election Finance
1804 Louisville Road
Frankfort, Kentucky 40601
(502) 564-2726

CAMPAIGN STATEMENT COVER PAGE

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APR 10 1 20 PM '89

1. Candidate Name Office Sought/Dist. No. County of Residence Political Party	} NA
2. Committee Name Supporting Office Sought/Dist. No.	

American Coalition for
Traditional Values
NA

3. Candidate/Committee Mailing Address PO Box 6689 Louisville, Ky. 40207 Area Code/Phone	4. Treasurer's Name and Mailing Address Frank G. Simon, MD PO Box 6689 Louisville, Ky. 40207 Area Code/Phone	5. This Statement Covers From <u>1</u> <u>1</u> <u>89</u> mo day yr To <u>3</u> <u>31</u> <u>89</u> mo day yr
---	--	---

TYPE OF STATEMENT		Pre-election, Post Election or Supplemental statement relates to:		Date of Election	
6a. <input type="checkbox"/> Pre-election (Quarterly Preceding)	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Special	Mo _____ Day _____ Yr _____		Mo _____ Day _____ Yr _____	
b. <input type="checkbox"/> Pre-election (32nd day preceding)					
c. <input type="checkbox"/> Pre-election (12th day preceding)					
d. <input type="checkbox"/> Post Election (30th day following)					
e. <input type="checkbox"/> Post Election Supplemental (60th day following)					
f. <input checked="" type="checkbox"/> Quarterly (Permanent Committee)					
g. <input type="checkbox"/> Semi-annual Supplemental					
h. <input type="checkbox"/> Annual Supplemental					
i. <input type="checkbox"/> Dissolution					
Date of Dissolution					
Mo _____ Day _____ Yr _____					
j. <input type="checkbox"/> Amendment - check one of the items above to indicate which statement is being amended.					
7. Verification: Certify that all reasonable diligence was used in the preparation of this Statement and attached schedule (if any) and to the best of my/our knowledge and belief the contents are true, accurate and complete.					
Treasurer		Date			
Frank G. Simon, MD		4 9 89			
Type or Print Name		Signature			
		Frank G. Simon			

98EE0277082

Candidate/Committee American Coalition for Traditional Values Inc

Period From 1/1/89 To 3/31/89

RECEIPTS

1. CONTRIBUTIONS:

a. Itemized (Schedule 1, Item 7a) +\$ 0.00

b. Unitemized Contributions (Number of People 3) +\$ 50.00

c. In-Kind Contributions Received (Schedule 1, Item 7b) +\$ 0.00

d. Other Receipts (Schedule 1, Item 7c) +\$ 0.00

2. TOTAL RECEIPTS =\$ 50.00

DISBURSEMENTS

3. TOTAL DISBURSEMENTS (Schedule 2, Item 7) \$ 0.00

4. Debts and Obligations owed BY: (Schedule 3, Item 10) \$ 0.00

5. Debts and Obligations owed TO: (Schedule 3, Item 10) \$ 0.00

BALANCE STATEMENT

6. Ending balance of last report (Enter (-) if no report has been filed) +\$ 458.54

7. Amount received during reporting period (Line 2, Column 1) +\$ 50.00

8. Sub-Total (Add Lines 6 and 7) =\$ 508.54

9. Amount disbursed during reporting period (Line 3, Column 1) -\$ 0.00

10. ENDING BALANCE (Subtract Line 9 from 8) =\$ 508.54

COLUMN I
THIS
PERIOD

COLUMN II
CUMULATIVE
THIS
ELECTION



Kentucky Registry of Election Finance
1604 Louisville Road
Frankfort, Kentucky 40601
(502) 564-2226

CAMPAIGN STATEMENT COVER PAGE

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APR 10 1 20 PM '89

(Amended)

3. Candidate/Committee Mailing Address PO Box 6689 Louisville, Ky. 40207 Area Code/Phone		4. Treasurer's Name and Mailing Address Frank G. Simon, MD PO Box 6689 Louisville, Ky. 40207 Area Code/Phone		5. This Statement Covers From <u>9</u> <u>30</u> <u>88</u> mo day yr To <u>12</u> <u>31</u> <u>89</u> mo day yr	
1. Candidate Name Office Sought/Dist. No. } NA County of Residence } Political Party }					
2. Committee Name American Coalition for Supporting Traditional Values Office Sought/Dist. No. } NA					
TYPE OF STATEMENT 6a. <input type="checkbox"/> Pre-election (Quarterly Processing) b. <input type="checkbox"/> Pre-election (32nd day preceding) c. <input type="checkbox"/> Pre-election (12th day preceding) d. <input type="checkbox"/> Post Election (30th day following) e. <input type="checkbox"/> Post Election Supplemental (60th day following) f. <input checked="" type="checkbox"/> Quarterly (Permanent Committee) g. <input type="checkbox"/> Semi-annual Supplemental h. <input type="checkbox"/> Annual Supplemental i. <input type="checkbox"/> Dissolution Date of Dissolution Mo Day Yr					
Pre-election, Post Election or Supplemental statement relates to: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Special Date of Election Mo Day Yr					
7. Verification: Certify that all reasonable diligence was used in the preparation of this Statement and attached schedule (if any) and to the best of my/our knowledge and belief the contents are true, accurate and complete. Treasurer <u>Frank G. Simon, MD</u> <u>Frank G. Simon</u> Type or Print Name Signature Date <u>1</u> <u>5</u> <u>89</u> Mo Day Yr					

88250257082

S U M M A R Y P A G E

Candidate/Committee American Coalition for Traditional Values Inc

Period From 9/30/88 To 12/31/88

RECEIPTS

1. CONTRIBUTIONS:

- a. Itemized (Schedule 1, Item 7a)
- b. Unitemized Contributions (Number of People 3)
- c. In-Kind Contributions Received (Schedule 1, Item 7b)
- d. Other Receipts (Schedule 1, Item 7c)

2. TOTAL RECEIPTS

DISBURSEMENTS

3. TOTAL DISBURSEMENTS (Schedule 2, Item 7)

4. Debts and Obligations owed BY: (Schedule 3, Item 10)

5. Debts and Obligations owed TO: (Schedule 3, Item 10)

BALANCE STATEMENT

6. Ending balance of last report (Enter (-0-) if no report has been filed)
7. Amount received during reporting period (Line 2, Column 1)
8. Sub-Total (Add Lines 6 and 7)
9. Amount disbursed during reporting period (Line 3, Column 1)
10. ENDING BALANCE (Subtract Line 9 from 8)

COLUMN I
THIS
PERIOD

COLUMN II
CUMULATIVE
THIS
ELECTION

+\$	<u>-0-</u>	+\$	<u>-0-</u>
+\$	<u>X 65.00</u>	+\$	<u>X 65.00</u>
+\$	<u>-0-</u>	+\$	<u>-0-</u>
+\$	<u>-0-</u>	+\$	<u>-0-</u>
=\$	<u>X 65.00</u>	=\$	<u>X 65.00</u>
\$	<u>X 275</u>	\$	<u>X 275</u>
\$	<u>-0-</u>	\$	<u>-0-</u>
\$	<u>-0-</u>	\$	<u>-0-</u>
+\$	<u>X 401.29</u>	+\$	<u>X 401.29</u>
+\$	<u>X 65.00</u>	+\$	<u>X 65.00</u>
=\$	<u>X 466.29</u>	=\$	<u>X 466.29</u>
-\$	<u>-2.25</u>	-\$	<u>-2.25</u>
=\$	<u>X 458.54</u>	=\$	<u>X 458.54</u>



Kentucky Registry of Election Finance
1604 Louisville Road
Frankfort, Kentucky 40601
(502) 564-2226

DISBURSEMENTS
SCHEDULE 2

1. Name of Candidate <i>W/A</i>	2. Committee Name <i>American Coalition for Traditional Values PAC</i>	3. This Statement Covers From <i>1</i> mo <i>30</i> day <i>2</i> yr To <i>12</i> mo <i>31</i> day <i>2</i> yr
------------------------------------	---	---

4. Name and Address of person to whom paid (if over \$100)	5. Purpose (be specific)	6. Date	7. Amount Disbursed
<i>Cumberland Bank</i>	<i>Checks for checkbook</i>	<i>7/24/88</i>	<i>\$7.75</i>

Subtotal This Page

Total This Period (only on last page of this schedule)

\$7.75



Kentucky Registry of Election Finance
1604 Louisville Road
Frankfort, Kentucky 40601
(502) 564-2226

CAMPAIGN STATEMENT COVER PAGE

RECEIVED USE ONLY
K.R.E.F.

JAN 6 1 24 PM '88

1. Candidate Name Office Sought/Dist. No. County of Residence Political Party	} N/A
2. Committee Name Supporting Office Sought/Dist. No.	

3. Candidate/Committee Mailing Address PO Box 6689 Louisville, Ky. 40207 Area Code/Phone	4. Treasurer's Name and Mailing Address Frank G. Simon, MD PO Box 6689 Louisville, Ky. 40207 Area Code/Phone	5. This Statement Covers From <u>9</u> <u>30</u> <u>88</u> mo day yr To <u>12</u> <u>31</u> <u>88</u> mo day yr
---	--	---

TYPE OF STATEMENT 6a. <input type="checkbox"/> Pre-election (Quarterly Preceding) b. <input type="checkbox"/> Pre-election (32nd day preceding) c. <input type="checkbox"/> Pre-election (12th day preceding) d. <input type="checkbox"/> Post Election (30th day following) e. <input type="checkbox"/> Post Election Supplemental (60th day following) f. <input checked="" type="checkbox"/> Quarterly (Permanent Committee) g. <input type="checkbox"/> Semi-annual Supplemental h. <input type="checkbox"/> Annual Supplemental i. <input type="checkbox"/> Dissolution Date of Dissolution Mo Day Yr		Pre-election, Post Election or Supplemental statement relates to: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Special Date of Election Mo Day Yr
7. Verification: Certify that all reasonable diligence was used in the preparation of this Statement and attached schedule (if any) and to the best of my/our knowledge and belief the contents are true, accurate and complete. 1. <input type="checkbox"/> Amendment - check one of the items above to indicate which statement is being amended.		
Treasurer <u>Frank G. Simon, MD</u> Type or Print Name <u>Frank G. Simon</u> Signature Date <u>1</u> <u>5</u> <u>89</u> Mo Day Yr		

16330274082

S U M M A R Y P A G E

Candidate/Committee American Coalition for Traditional Values Inc

Period From 9/30/88 To 12/31/88

RECEIPTS

1. CONTRIBUTIONS:

a. Itemized (Schedule 1, Item 7a) +\$ -0-

b. Unitemized Contributions (Number of People) +\$ -6-

c. In-Kind Contributions Received (Schedule 1, Item 7b) +\$ -6-

d. Other Receipts (Schedule 1, Item 7c) +\$ -0-

2. TOTAL RECEIPTS =\$ -6-

DISBURSEMENTS

3. TOTAL DISBURSEMENTS (Schedule 2, Item 7) \$ -0-

4. Debts and Obligations owed BY: (Schedule 3, Item 10) \$ -0-

5. Debts and Obligations owed TO: (Schedule 3, Item 10) \$ -0-

BALANCE STATEMENT

6. Ending balance of last report (Enter (-0-) if no report has been filed) +\$ -0-

7. Amount received during reporting period (Line 2, Column 1) +\$ -6-

8. Sub-Total (Add Lines 6 and 7) =\$ -6-

9. Amount disbursed during reporting period (Line 3, Column 1) -\$ -0-

10. ENDING BALANCE (Subtract Line 9 from 8) =\$ -6-

COLUMN I
THIS
PERIOD

COLUMN II
CUMULATIVE
THIS
ELECTION

26550277082



Kentucky Registry of Election Finance
1504 Louisville Road
Frankfort, Kentucky 40601
(502) 564-2226

CAMPAIGN STATEMENT COVER PAGE

RECEIVED
K.R.E.F.
OCT 7 1 33 PM '88
OFFICE USE ONLY

1. Candidate Name Office Sought/Dist. No. County of Residence Political Party	} NA
2. Committee Name Supporting Office Sought/Dist. No.	

American Coalition for
Traditional Values
} NA

3. Candidate/Committee Mailing Address PO Box 6689 Louisville, Ky. 40207 Area Code/Phone	4. Treasurer's Name and Mailing Address Frank G. Simon, MD PO Box 6689 Louisville, Ky. 40207 Area Code/Phone	5. This Statement Covers From July 1 88 mo day yr To Sept. 30 88 mo day yr
---	--	--

TYPE OF STATEMENT

6a. ☐ Pre-election (Quarterly Preceding)

b. ☐ Pre-election (32nd day preceding)

c. ☐ Pre-election (12th day preceding)

d. ☐ Post Election (30th day following)

e. ☐ Post Election Supplemental (60th day following)

f. ☒ Quarterly (Permanent Committee)

g. ☐ Semi-annual Supplemental

h. ☐ Annual Supplemental

i. ☐ Dissolution

Date of Dissolution

Mo Day Yr

j. ☐ Amendment - check one of the items above to indicate which statement is being amended.

7. Verification: Certify that all reasonable diligence was used in the preparation of this Statement and attached schedule (if any) and to the best of my/our knowledge and belief the contents are true, accurate and complete.

Treasurer	Frank G. Simon, MD	Signature	Frank G. Simon	Date	Mo	Day	Yr
-----------	--------------------	-----------	----------------	------	----	-----	----

56550277082

S U M M A R Y P A G E

Candidate/Committee American Coalition for Traditional Values Inc

Period From Jul 1, 1986 To Sept 30, 1988

RECEIPTS

1. CONTRIBUTIONS:

- a. Itemized (Schedule 1, Item 7a)
- b. Unitemized Contributions (Number of People 15)
- c. In-Kind Contributions Received (Schedule 1, Item 7b)
- d. Other Receipts (Schedule 1, Item 7c)

2. TOTAL RECEIPTS

DISBURSEMENTS

3. TOTAL DISBURSEMENTS (Schedule 2, Item 7)

- 4. Debts and Obligations owed BY: (Schedule 3, Item 10)
- 5. Debts and Obligations owed TO: (Schedule 3, Item 10)

BALANCE STATEMENT

- 6. Ending balance of last report (Enter (-0-) if no report has been filed)
- 7. Amount received during reporting period (Line 2, Column 1)
- 8. Sub-Total (Add Lines 6 and 7)
- 9. Amount disbursed during reporting period (Line 3, Column 1)
- 10. ENDING BALANCE (Subtract Line 9 from 8)

COLUMN I
THIS
PERIOD

COLUMN II
CUMULATIVE
THIS
ELECTION

+ \$	- 0 -	
+ \$	165. =	
+ \$	- 0 -	
+ \$	- 0 -	
= \$	165. =	
\$	200. =	\$
\$	- 0 -	
\$	- 0 -	
+ \$	436.29	
+ \$	165. =	
= \$	601.29	
- \$	200. =	
= \$	401.29	

76330277032



Kentucky Registry of Election Finance
1804 Louisville Road
Frankfort, Kentucky 40601
(502) 564-2226

CAMPAIGN STATEMENT COVER PAGE

RECEIVED
K.R.E.F.
JUN 31 11 53 AM '88

OFFICE USE ONLY

1. Candidate Name	Office Sought/Dist. No.	County of Residence	Political Party
	NA		

2. Committee Name	Supporting	Office Sought/Dist. No.
American Coalition for Traditional Values	NA	

3. Candidate/Committee Mailing Address	4. Treasurer's Name and Mailing Address	5. This Statement Covers
PO Box 6689 Louisville, Ky. 40207	Frank G. Simon, MD PO Box 6689 Louisville, Ky. 40207	From 3/31/88 To 6/30/88
Area Code/Phone	Area Code/Phone	

TYPE OF STATEMENT	Pre-election, Post Election or Supplemental statement relates to:	Date of Election
-------------------	--	------------------

a. <input type="checkbox"/> Pre-election (Quarterly Preceding)	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Special	Mo Day Yr
b. <input type="checkbox"/> Pre-election (32nd day preceding)		
c. <input type="checkbox"/> Pre-election (12th day preceding)		
d. <input type="checkbox"/> Post Election (30th day following)		
e. <input type="checkbox"/> Post Election Supplemental (60th day following)		
f. <input checked="" type="checkbox"/> Quarterly (Permanent Committee)		
g. <input type="checkbox"/> Semi-annual Supplemental		
h. <input type="checkbox"/> Annual Supplemental		
i. <input type="checkbox"/> Dissolution		
Date of Dissolution		

Mo Day Yr	
-----------	--

7. Verification: Certify that all reasonable diligence was used in the preparation of this Statement and attached schedule (if any) and to the best of my/our knowledge and belief the contents are true, accurate and complete.

Treasurer	Frank G. Simon, MD	Signature	Frank G. Simon	Date	6/30/88
Type or Print Name				Mo Day Yr	

96550274082

Candidate/Committee

American Coalition for Traditional Values Inc.
631 W. 15th St. E.

Period From

3/31/88

To

6/30/88

RECEIPTS

1. CONTRIBUTIONS:

	COLUMN I THIS PERIOD	COLUMN II CUMULATIVE THIS ELECTION
a. Itemized (Schedule 1, Item 7a)	+\$ 1,564.29	
b. Unitemized Contributions (Number of People <u>20</u>)	+\$ 373.15	
c. In-Kind Contributions Received (Schedule 1, Item 7b)	+\$ -0-	
d. Other Receipts (Schedule 1, Item 7c)	+\$ -0-	
2. TOTAL RECEIPTS	=\$ 1,937.54	\$

DISBURSEMENTS

3. TOTAL DISBURSEMENTS (Schedule 2, Item 7)	\$ 1,564.39	\$
4. Debts and Obligations owed BY: (Schedule 3, Item 10)	\$ -0-	
5. Debts and Obligations owed TO: (Schedule 3, Item 10)	\$ -0-	

BALANCE STATEMENT

6. Ending balance of last report (Enter (-0-) if no report has been filed)	+\$ 63.14
7. Amount received during reporting period (Line 2, Column 1)	+\$ 1,937.54
8. Sub-Total (Add Lines 6 and 7)	=\$ 2,000.68
9. Amount disbursed during reporting period (Line 3, Column 1)	-\$ 1,564.39
10. ENDING BALANCE (Subtract Line 9 from 8)	=\$ 436.29

L6EE027P082



Kentucky Registry of Election Finance

1804 Louisville Road
Frankfort, Kentucky 40601
(502) 564-2226

ITEMIZED RECEIPTS SCHEDULE 1

1. Name of Candidate

N/A

2. Committee Name

American
Coalition for Traditional
Values

3. This Statement Covers

From 3 31 88
mo day yr
To 6 30 88
mo day yr

4a. Name and Address from whom received	4b. AGE	5. Type of Contribution or Other Receipt	6. Date of Receipt	AMOUNT			8. Cumulative for election	9. Contributor Occupation
				7a. Contributions of Money	7b. In-Kind Contributions Received	7c. Other Receipts		
Frank G Simon PO Box 6689 Louisville, Ky. 40207		Contributions: <input type="checkbox"/> Candidate <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> In-Kind (describe) _____ Other Receipts <input type="checkbox"/> Interest <input type="checkbox"/> Loan from lending institution <input type="checkbox"/> Misc. (Specify) _____	5/23/88	1,564.39			1,564.39	Physician
		Contributions: <input type="checkbox"/> Candidate <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> In-Kind (describe) _____ Other Receipts <input type="checkbox"/> Interest <input type="checkbox"/> Loan from lending institution <input type="checkbox"/> Misc. (Specify) _____						
		Contributions: <input type="checkbox"/> Candidate <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> In-Kind (describe) _____ Other Receipts <input type="checkbox"/> Interest <input type="checkbox"/> Loan from lending institution <input type="checkbox"/> Misc. (Specify) _____						
		Contributions: <input type="checkbox"/> Candidate <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> In-Kind (describe) _____ Other Receipts <input type="checkbox"/> Interest <input type="checkbox"/> Loan from lending institution <input type="checkbox"/> Misc. (Specify) _____						
		Contributions: <input type="checkbox"/> Candidate <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> In-Kind (describe) _____ Other Receipts <input type="checkbox"/> Interest <input type="checkbox"/> Loan from lending institution <input type="checkbox"/> Misc. (Specify) _____						
		Contributions: <input type="checkbox"/> Candidate <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> In-Kind (describe) _____ Other Receipts <input type="checkbox"/> Interest <input type="checkbox"/> Loan from lending institution <input type="checkbox"/> Misc. (Specify) _____						
		Contributions: <input type="checkbox"/> Candidate <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> In-Kind (describe) _____ Other Receipts <input type="checkbox"/> Interest <input type="checkbox"/> Loan from lending institution <input type="checkbox"/> Misc. (Specify) _____						

Subtotal This Page

1,564.39

1,564.39

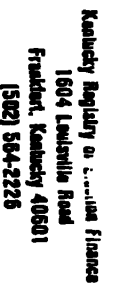
Total This Period (only on last page of this schedule)

86330277082

Enter this total on line

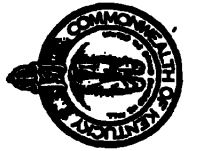
Enter this total on line

Enter this total on line



1. Name of Candidate <i>N/A</i>	2. Committee Name <i>American Coalition for Traditional Values</i>	3. This Statement Covers From <u>3/21</u> <u>88</u> mo day yr To <u>6</u> <u>30</u> <u>88</u> mo day yr
------------------------------------	---	---

1,564. ³⁹	1,564. ³⁹
----------------------	----------------------



Kentucky Registry of Election Finance
1604 Louisville Road
Frankfort, Kentucky 40601
(502) 564-2725

CAMPAIGN STATEMENT COVER PAGE

1. Name of candidate	} NA
Office sought	
Dist. No.	
County of residence	

2. Committee Name	Legislative Record
Supporting Dist. No.	NA

3. Candidate Committee Mailing Address PO Box 6689 Louisville, Ky. 40207 Area Code/Phone	4. Treasurer's Name and Mailing Address Frank G. Simon, MD PO Box 6689 Louisville, Ky. 40207 Area Code/Phone:	5. This Statement Covers From 1/88 To 3/88 mo day yr mo day yr
---	---	--

TYPE OF STATEMENT

6a. ☐ Pre-election (Quarterly)

Pre-election or Post-election statement relates to:

Date of Election

b. ☐ Pre-election (32nd day preceding)

☐ Primary ☐ General ☐ Special

c. ☐ Pre-election (12 day preceding)

Mo Day Yr

d. ☐ Post-election (30th day following)

e. ☐ Post-election (Semi-Annual)

f. ☐ Post-election (Annual)

g. ☒ Permanent Committee

h. ☐ Amendment (Complete Item 6a, 6b, 6c, 6d, 6e, 6f, 6g, 6i to indicate which statement is being amended)

i. ☐ : Dissolution of Committee/Fund
Date of Dissolution

Mo Day Yr

7. Verification: certify that all reasonable diligence was used in the preparation of this Statement and attached schedules (if any) and to the best of my/our knowledge and belief the contents are true, accurate and complete.

Treasurer	Frank G. Simon	Signature	Frank G. Simon	Date	4	4	88
	Type or Print Name			Mo	Day	Yr.	

RECEIVED OFFICE USE ONLY
K.R.E.F.
APR 7 1 30 PM '88

00450277082

SUMMARY PAGE

Candidate/Committee Legislative Research PAC
 Period From 1/1/88 To 3/31/88

COLUMN I
THIS PERIOD

COLUMN II
CUMULATIVE THIS
ELECTION

RECEIPTS

1. Contributions:

a. Itemized (Schedule 1, Item 7a)

+\$ -0-

b. Unitemized (No. of people _____)

+\$ -0-

c. Other Receipts (Schedule 1, Item 7C)

+\$ -0-

d. Fund Raiser Balance (Schedule 4)

+\$ -0-

2. TOTAL RECEIPTS

=\$ -0- \$ _____

DISBURSEMENTS

3. TOTAL DISBURSEMENTS (Schedule 2, Item 7)

=\$ -0- \$ _____

IN-KIND CONTRIBUTIONS

4. TOTAL IN-KIND CONTRIBUTIONS (Schedule 1, Item 7b)

=\$ -0-

DEBTS AND OBLIGATIONS

5. Debts and obligations owed BY: (Schedule 3)

\$ -0-

6. Debts and obligations owed TO: (Schedule 3)

\$ -0-

BALANCE STATEMENT

7. Ending balance of last report filed

(Enter zero (-0-) if no report has been filed)

+\$ 63.14

8. Amount received during reporting period

(Line 2, TOTAL RECEIPTS)

\$ -0-

9. Sub-Total (Add Lines 7 and 8)

=\$ -0-

10. Amount disbursed this report (Line 3, TOTAL DISBURSEMENTS)

-\$ -0-

11. ENDING BALANCE (Subtract Line 10 from 9)

=\$ 63.14

28044203401



Kentucky Registry of Election Finance
1804 Lexington Road
Frankfort, Kentucky 40601
(502) 564-2226

CAMPAIGN STATEMENT COVER PAGE

RECEIVED OFFICE USE ONLY
K.R.E.F.

OCT 14 1 16 PM '87

1. Name of candidate Office sought Dist. No.	} NA
County of residence	
2. Committee Name Supporting Dist. No.	Legislative Research PAC

3. Candidate/Committee Mailing Address PO Box 6689 Louisville, Ky. 40207 Area Code/Phone (502) 895-6263	4. Treasurer's Name and Mailing Address Frank G. Simon PO Box 6689 Louisville, Ky. 40207 Area Code/Phone (502) 895-6263	5. This Statement Covers From <u>7</u> <u>1</u> <u>87</u> mo day yr To <u>9</u> <u>30</u> <u>87</u> mo day yr
--	---	---

TYPE OF STATEMENT

6a. ☐ Pre-election (Quarterly)

6b. ☐ Pre-election (32nd day preceding)

6c. ☐ Pre-election (12 day preceding)

6d. ☐ Post-election (30th day following)

6e. ☐ Post-election (Semi-Annual)

6f. ☐ Post-election (Annual)

6g. ☒ Permanent Committee

6h. ☐ Amendment (Complete Item 6a, 6b, 6c, 6d, 6e, 6f, 6g, 6h to indicate which statement is being amended)

6i. ☐ Dissolution of Committee/Fund
Date of Dissolution

Pre-election or Post-election statement relates to:

☐ Primary ☐ General ☐ Special

Date of Election

Mo Day Yr

Mo Day Yr

7. Verification: certify that all reasonable diligence was used in the preparation of this Statement and attached schedules (if any) and to the best of my/our knowledge and belief the contents are true, accurate and complete.

Treasurer Frank G. Simon Date 10 10 87
Type or Print Name Signature Mo Day Yr

20450274082

SUMMARY PAGE

Candidate/Committee Legislative Research PAC
 Period From 7/1/87 To 9/30/87

COLUMN I
THIS PERIOD

COLUMN II
CUMULATIVE THIS
ELECTION

RECEIPTS

1. Contributions:

a. Itemized (Schedule 1, Item 7a)

+\$ -0-

b. Unitemized (No. of people)

+\$ -0-

c. Other Receipts (Schedule 1, Item 7C)

+\$ -0-

d. Fund Raiser Balance (Schedule 4)

+\$ -0-

2. TOTAL RECEIPTS

=\$ -0- \$

DISBURSEMENTS

3. TOTAL DISBURSEMENTS (Schedule 2, Item 7)

=\$ 0.15 \$

IN-KIND CONTRIBUTIONS

4. TOTAL IN-KIND CONTRIBUTIONS (Schedule 1, Item 7b)

=\$ -0-

DEBTS AND OBLIGATIONS

5. Debts and obligations owed BY: (Schedule 3)

\$ -0-

6. Debts and obligations owed TO: (Schedule 3)

\$ -0-

BALANCE STATEMENT

7. Ending balance of last report filed

(Enter zero (-0-) if no report has been filed)

+\$ 63.29

8. Amount received during reporting period

(Line 2, TOTAL RECEIPTS)

\$ -0-

9. Sub-Total (Add Lines 7 and 8)

=\$ 63.29

10. Amount disbursed this report (Line 3, TOTAL DISBURSEMENTS)

-\$.15

11. ENDING BALANCE (Subtract Line 10 from 9)

=\$ 63.14

28044203403



1604 Louisville Road
Frankfort, Kentucky 40601
15021 554-2328

**DISBURSEMENTS
SCHEDULE 2**

1. Name of candidate	2. Committee Name	3. This Statement Covers
Office sought Dist. No. County of residence	Supporting Dist. No.	From To:
} NA }	} NA }	7 1 87 mo day yr 9 30 87 mo day yr

[illegible]



Kentucky Registry of Election Finance
1804 Louisville Bldg
Frankfort, Kentucky 40501
(502) 564-2226

CAMPAIGN STATEMENT COVER PAGE

RECEIVED
K.R.E.F.
JAN 4 10 58 AM '88

OFFICE USE ONLY

1. Name of candidate Office sought } NA Dist. No. } County of residence }		2. Committee Name <i>Legislative Research PAC</i> Supporting Dist. No. } NA	
3. Candidate/Committee Mailing Address <i>PO Box 6689 Louisville, Ky. 40207</i> Area Code/Phone:		4. Treasurer's Name and Mailing Address <i>Frank G. Simon PO Box 6689 Louisville, Ky. 40207</i> Area Code/Phone:	
TYPE OF STATEMENT 6a. <input type="checkbox"/> Pre-election (Quarterly) 6b. <input type="checkbox"/> Pre-election (32nd day preceding) 6c. <input type="checkbox"/> Pre-election (12 day preceding) 6d. <input type="checkbox"/> Post-election (30th day following) 6e. <input type="checkbox"/> Post-election (Semi-Annual) 6f. <input type="checkbox"/> Post-election (Annual) 6g. <input checked="" type="checkbox"/> Permanent Committee 6h. <input type="checkbox"/> Amendment (Complete Item 6a, 6b, 6c, 6f, 6g, 6i to indicate which statement is being amended) 6i. <input type="checkbox"/> Dissolution of Committee/Fund Date of Dissolution Mo Day Yr		Pre-election or Post-election statement relates to: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Special Date of Election Mo Day Yr	
5. This Statement Covers From <u>9</u> <u>30</u> <u>87</u> mo day yr To <u>12</u> <u>31</u> <u>87</u> mo day yr			
7. Verification: certify that all reasonable diligence was used in the preparation of this Statement and attached schedules (if any) and to the best of my/our knowledge and belief the contents are true, accurate and complete. Treasurer <u>Frank G. Simon</u> Date <u>12</u> <u>31</u> <u>87</u> Type or Print Name Signature Mo Day Yr			

50750747082

SUMMARY PAGE

Candidate/Committee Legislative Research PAC

COLUMN I
THIS PERIOD

COLUMN II
CUMULATIVE THIS
ELECTION

Period From 9/30/87 To 12/31/87

RECEIPTS

1. Contributions:

a. Itemized (Schedule 1, Item 7a)

+\$ -0-

b. Unitemized (No. of people _____)

+\$ -0-

c. Other Receipts (Schedule 1, Item 7C)

+\$ -0-

d. Fund Raiser Balance (Schedule 4)

+\$ -0-

2. TOTAL RECEIPTS

=\$ -0- \$ _____

DISBURSEMENTS

3. TOTAL DISBURSEMENTS (Schedule 2, Item 7)

=\$ -0- \$ _____

IN-KIND CONTRIBUTIONS

4. TOTAL IN-KIND CONTRIBUTIONS (Schedule 1, Item 7b)

=\$ -0-

DEBTS AND OBLIGATIONS

5. Debts and obligations owed BY: (Schedule 3)

\$ -0-

6. Debts and obligations owed TO: (Schedule 3)

\$ -0-

BALANCE STATEMENT

7. Ending balance of last report filed

(Enter zero (-0-) if no report has been filed)

+\$ 63.14

8. Amount received during reporting period

(Line 2, TOTAL RECEIPTS)

\$ -0-

9. Sub-Total (Add Lines 7 and 8)

=\$ -0-

10. Amount disbursed this report (Line 3, TOTAL DISBURSEMENTS)

-\$ -0-

11. ENDING BALANCE (Subtract Line 10 from 9)

=\$ 63.14

28044203406



Kentucky Registry of Election Finance
1804 Louisville Road
Frankfort, Kentucky 40601
(502) 584-2226

CAMPAIGN STATEMENT COVER PAGE

RECEIVED
K.R.E.F.
JUL 6 1 37 PM '87
OFFICE USE ONLY

1. Name of candidate Office sought Dist. No. County of residence	} N/A
2. Committee Name Supporting Dist. No.	
Legislative Research PAC } N/A	

3. Candidate/Committee Mailing Address PO Box 6689 Louisville, Ky. 40207 Area Code/Phone (502) 895-6263	4. Treasurer's Name and Mailing Address Frank G. Simon PO Box 6689 Louisville, Ky. 40207 Area Code/Phone: (502) 895-6263	5. This Statement Covers From 4 mo 1 day yr 87 To 6 mo 30 day yr 87
--	--	---

TYPE OF STATEMENT

6a. ☐ Pre-election (Quarterly)

Pre-election or Post-election statement relates to:

Date of Election

b. ☐ Pre-election (32nd day preceding)

☐ Primary ☐ General ☐ Special

Mo Day Yr

c. ☐ Pre-election (12 day preceding)

d. ☐ Post-election (30th day following)

e. ☐ Post-election (Semi-Annual)

f. ☐ Post-election (Annual)

g. ☒ Permanent Committee

h. ☐ Amendment (Complete Item 6a, 6b, 6c, 6d, 6e, 6f, 6g, 6i to indicate which statement is being amended)

i. ☐ : Dissolution of Committee/Fund
Date of Dissolution

Mo Day Yr

7. Verification: certify that all reasonable diligence was used in the preparation of this Statement and attached schedules (if any) and to the best of my/our knowledge and belief the contents are true, accurate and complete.

Treasurer	Frank G. Simon	Signature	Frank G. Simon	Date	7/3/87	Mo	Day	Yr.
-----------	----------------	-----------	----------------	------	--------	----	-----	-----

40750277082

SUMMARY PAGE

Candidate/Committee Legislative Research PAJ
 Period From 4/1/87 To 6/30/87

COLUMN I
THIS PERIOD

COLUMN II
CUMULATIVE THIS
ELECTION

RECEIPTS

1. Contributions:

a. Itemized (Schedule 1, Item 7a)

+\$ 1,527.98

b. Unitemized (No. of people _____)

+\$ -0-

c. Other Receipts (Schedule 1, Item 7C)

+\$ 7.12

d. Fund Raiser Balance (Schedule 4)

+\$ -0-

2. TOTAL RECEIPTS

=\$ 1,535.00 \$ 1,535.00

DISBURSEMENTS

3. TOTAL DISBURSEMENTS (Schedule 2, Item 7)

=\$ 2,027.88 \$ _____

IN-KIND CONTRIBUTIONS

4. TOTAL IN-KIND CONTRIBUTIONS (Schedule 1, Item 7b)

=\$ -0-

DEBTS AND OBLIGATIONS

5. Debts and obligations owed BY: (Schedule 3)

\$ -0-

6. Debts and obligations owed TO: (Schedule 3)

\$ -0-

BALANCE STATEMENT

7. Ending balance of last report filed

(Enter zero (-0-) if no report has been filed)

+\$ 556.17

8. Amount received during reporting period

(Line 2, TOTAL RECEIPTS)

\$ 1,535.00

9. Sub-Total (Add Lines 7 and 8)

=\$ 2,091.17

10. Amount disbursed this report (Line 3, TOTAL DISBURSEMENTS)

-\$ 2,027.88

11. ENDING BALANCE (Subtract Line 10 from 9)

=\$ 63.29

28044203408



1004 Louisville Road
Frankfort, Kentucky 40601
(502) 564-2228

ITEMIZED RECEIPTS
SCHEDULE 1

1. Name of candidate
Office sought
Dist. No.
County of residence

2. Committee Name
Supporting
Dist. No.
Legislative Research P.A.C.

3. This Statement Covers
From 4/1/87
To 6/30/87
mo day yr
mo day yr

4. Name and Address from whom received	4A. AGE	5. Type of Contribution or Other Receipt	6. Date of Receipt	AMOUNT			8. Cumulative for election	9. If over \$300.00 cumulative, enter Contributor's Occupation.
				7A. Contributions of Money	7B. In-Kind Contributions Received	7C. Other Receipts		
Frank G. Simon 10 Box 6684 Louisville, Ky. 40207		Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> In-Kind (describe) _____ Other Receipts <input type="checkbox"/> Interest <input type="checkbox"/> Loan from lending institution <input type="checkbox"/> Misc (specify) _____	6/30/87	\$ 1,527.88			1,527.88	Physician
The Cumberland Bank		Contributions: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> In-Kind (describe) _____ Other Receipts <input type="checkbox"/> Interest <input type="checkbox"/> Loan from lending institution <input type="checkbox"/> Misc (specify) _____				\$ 7.12	7.12	
		Contributions: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> In-Kind (describe) _____ Other Receipts <input type="checkbox"/> Interest <input type="checkbox"/> Loan from lending institution <input type="checkbox"/> Misc (specify) _____						
		Contributions: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> In-Kind (describe) _____ Other Receipts <input type="checkbox"/> Interest <input type="checkbox"/> Loan from lending institution <input type="checkbox"/> Misc (specify) _____						
		Contributions: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> In-Kind (describe) _____ Other Receipts <input type="checkbox"/> Interest <input type="checkbox"/> Loan from lending institution <input type="checkbox"/> Misc (specify) _____						
		Contributions: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> In-Kind (describe) _____ Other Receipts <input type="checkbox"/> Interest <input type="checkbox"/> Loan from lending institution <input type="checkbox"/> Misc (specify) _____						

Subtotal This Page

Total This Period (only on last page of this schedule)

1,527.88		7.12
1,527.88		7.12



DISBURSEMENTS

1. Name of candidate
Office sought
Dist. No.
County of residence

2. Committee Name
Supporting
Dist. No.

3. This Statement Covers

From	4	1	87
	mo	day	yr
To:	6	20	87
	mo	day	yr

Page 1 of 1

Subtotal This Page

2027.88

2,027.88

Enter this total
on line 4

28044203410



Kentucky Registry of Election Finance
1804 Louisville Road
Frankfort, Kentucky 40601
(502) 564-2226

CAMPAIGN STATEMENT COVER PAGE

RECEIVED
K.R.E.F.
OFFICE USE ONLY
APR 13 12 34 PM '87

1. Name of candidate <u>N/A</u> Office sought <u>N/A</u> Dist. No. <u>N/A</u> County of residence <u>N/A</u>	2. Committee Name <u>Legislative Research</u> <u>Inc.</u> Supporting Dist. No. <u>N/A</u>
---	--

3. Candidate/Committee Mailing Address <u>PO Box 6689</u> <u>Louisville, Ky. 40207</u> Area Code/Phone <u>(502) 895-6263</u>	4. Treasurer's Name and Mailing Address <u>Frank G. Simon</u> <u>PO Box 6689</u> <u>Louisville, Ky. 40207</u> Area Code/Phone <u>(502) 895-6263</u>	5. This Statement Covers From <u>Dec. 31, 1986</u> mo day yr To <u>March 31, 1987</u> mo day yr
---	---	---

TYPE OF STATEMENT

6a. <input type="checkbox"/> Pre-election (Quarterly)	Pre-election or Post-election statement relates to: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Special	Date of Election Mo Day Yr
b. <input type="checkbox"/> Pre-election (32nd day preceding)		
c. <input type="checkbox"/> Pre-election (12 day preceding)		
d. <input type="checkbox"/> Post-election (30th day following)		
e. <input type="checkbox"/> Post-election (Semi-Annual)		
f. <input type="checkbox"/> Post-election (Annual)		
g. <input checked="" type="checkbox"/> Permanent Committee		
h. <input type="checkbox"/> Amendment (Complete Item 6a, 6b, 6c, 6f, 6g, 6i to indicate which statement is being amended)		
i. <input type="checkbox"/> Dissolution of Committee/Fund Date of Dissolution		

Mo Day Yr

7. Verification: certify that all reasonable diligence was used in the preparation of this Statement and attached schedules (if any) and to the best of my/our knowledge and belief the contents are true, accurate and complete.

Treasurer <u>Frank G. Simon</u>	<u>Frank G. Simon</u>	Date <u>4</u> <u>9</u> <u>87</u>
Type or Print Name	Signature	Mo Day Yr

TTF00276082

SUMMARY PAGE

Candidate/Committee Legislative Research PAC

Period From 12/31/86 To 3/31/87

COLUMN I
THIS PERIOD

COLUMN II
CUMULATIVE THIS
ELECTION

RECEIPTS

1. Contributions:

a. Itemized (Schedule 1, Item 7a)

+\$ - 0 -

b. Unitemized (No. of people _____)

+\$ - 0 -

c. Other Receipts (Schedule 1, Item 7C)

+\$ - 0 -

d. Fund Raiser Balance (Schedule 4)

+\$ - 0 -

2. TOTAL RECEIPTS

=\$ - 0 -

\$ _____

DISBURSEMENTS

3. TOTAL DISBURSEMENTS (Schedule 2, Item 7)

=\$ - 0 -

\$ - 0 -

IN-KIND CONTRIBUTIONS

4. TOTAL IN-KIND CONTRIBUTIONS (Schedule 1, Item 7b)

=\$ - 0 -

DEBTS AND OBLIGATIONS

5. Debts and obligations owed BY: (Schedule 3)

\$ - 0 -

6. Debts and obligations owed TO: (Schedule 3)

\$ - 0 -

BALANCE STATEMENT

7. Ending balance of last report filed

(Enter zero (-0-) if no report has been filed)

+\$ 556.17

8. Amount received during reporting period

(Line 2, TOTAL RECEIPTS)

\$ - 0 -

9. Sub-Total (Add Lines 7 and 8)

=\$ - 0 -

10. Amount disbursed this report (Line 3, TOTAL DISBURSEMENTS)

-\$ - 0 -

11. ENDING BALANCE (Subtract Line 10 from 9)

=\$ 556.17

28044203412

FILED IN 11-11-87
RECEIVED

EXHIBIT B

28044203413

STATEMENT OF ORGANIZATION

(See separate rules for Individuals)

1. NAME OF COMMITTEE IN FULL Frederick's Heritage Forum		2. DATE 2/20/94
3. NUMBER AND STREET ADDRESS PO Box 6699		4. CITY, STATE AND ZIP CODE Louisville, Ky. 40206
5. TYPE OF COMMITTEE (Check one)		6. IS THIS STATEMENT BEING PREPARED BY THE COMMITTEE? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO

- ☐ (a) This committee is a principal campaign committee. (Complete the candidate information below.)
- ☐ (b) This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)

Name of Candidate	Candidate Party Affiliation	Office Sought	State District
-------------------	-----------------------------	---------------	----------------

- ☐ (c) This committee supports/opposes only one candidate _____ (name of candidate) and is NOT an authorized committee.
- ☐ (d) This committee is a _____ committee of the _____ Party.
(National, State or Subordinate) (Democratic, Republican, etc.)
- ☐ (e) This committee is a separate segregated fund.
- ☒ (f) This committee supports/opposes more than one Federal candidate and is NOT a separate segregated fund or a party committee.

8. Name of Any Connected Organization or Affiliated Committee	Mailing Address and ZIP Code	Relationship
None		

Type of Connected Organization

- ☐ Corporation ☐ Corporation with Capital Stock ☐ Labor Organization ☐ Membership Organization ☐ Trade Association ☐ Cooperative

7. Custodian of Records: Identify by name, address (phone number - optional) and position of the person in possession of committee books and records.

Full Name Frank G. Simon	Mailing Address PO Box 6699, Louisville, Ky. 40206	Title or Position Treasurer
(502) 895-6263		

8. Treasurer: List the name and address (phone number - optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).

Full Name Arthur Cerminara	Mailing Address PO Box 6699 Louisville, Ky 40206	Title or Position Treasurer
--------------------------------------	--	---------------------------------------

9. Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc. PNC Bank Village Office	Mailing Address and ZIP Code 4004 Dutchmans Ln Louisville, Ky. 40207
--	--

I certify that I have examined this statement and to the best of my knowledge and belief it is true, correct and complete.

TYPE OR PRINT NAME OF TREASURER

Art Cerminara

SIGNATURE OF TREASURER

Arthur Cerminara

DATE

2/23/94

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this statement to the penalties of 18 U.S.C. (a)(1). ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.

--	--	--	--

For further information contact:
Federal Election Commission
Tel: 202-456-6000
Local: 202-456-6100

FEC FORM
(revised 4/93)

28044203414

243316:1JJ

Federal Election Commission
ENVELOPE REPLACEMENT PAGE
FOR INCOMING DOCUMENTS

The Commission has added this page to the end of this filing to indicate how it was received.

☐ Hand Delivered

DATE OF RECEIPT

☒ First Class Mail

POSTMARKED

3-25-94

☐ Registered/Certified Mail

POSTMARKED

☐ No Postmark

☐ Postmark Illegible

☐ Received from the House Office of Records
and Registration

DATE OF RECEIPT

☐ Received from the Senate Office of Public
Records

DATE OF RECEIPT

☐ Other (Specify):

POSTMARKED

and/or DATE OF RECEIPT

HA
PREPARED

3-3-94
DATE PREPARED

FEC FORM 70-2 (1990)

28044203415

24,383,131

28044203416

EXHIBIT C

WHO'S THE REAL REPUBLICAN?

ISSUE	HARDY	STOKES	CLINTON
Gays in the Military	AGAINST*	FOR**	FOR
Gov't-Controlled Health Care	AGAINST*	FOR**	FOR
NAFTA	AGAINST*	FOR**	FOR
Restrictive Gun Control Legislation	AGAINST*	FOR**	FOR
Taxpayer-Funded Abortion	AGAINST*	FOR**	FOR
Parental Notification for Abortion for minors	AGAINST*	FOR**	FOR

GAYS IN THE MILITARY

*Hardy -- Is "strongly opposed to the Clinton administration's policy regarding gays in the military and would fight to uphold the Uniform Code of Military Justice which clearly prohibits sexual deviation of this nature." (*Campaign Position Paper*)

**Stokes -- They (gays) should be allowed. (*The Courier-Journal*, April 28, 1994)

GOVERNMENT-CONTROLLED HEALTH CARE

*Hardy -- "Will work for the defeat of the proposed Clinton Health Care Plan in an effort to protect small business." (*Campaign Position Paper*)

**Stokes -- Supports health care reform that would penalize non-participants in a mandatory health-insurance plan, fining them the cost of an average yearly premium plus 20%. The penalty could amount to as much as \$7,000 for an individual or for each person employed by a business-owner.

NAFTA

*Hardy -- Opposed. (*Campaign Position Paper*)

**Stokes -- Favored. (*The Courier-Journal*, November 2, 1992)

RESTRICTIVE GUN CONTROL LEGISLATION

*Hardy -- "We don't have a gun control problem in this nation today. What we have is a crime control problem, and taking the firearms out of the hands of our law-abiding citizens will in no way even scratch the surface of the crime issue at hand." (*Campaign Position Paper*)

**Stokes -- Favors firearm registration. (*The Courier-Journal*, April 28, 1992)

TAXPAYER-FUNDED ABORTION/PARENTAL NOTIFICATION FOR ABORTION FOR MINORS

*Hardy -- Pro-life. (*Campaign Position Paper*)

**Stokes -- Voted against informed consent, voted against parental or judicial consent for girls under 18, and voted against the licensing of abortion facilities. (*Record as state legislator*) Supports the Freedom of Choice Act which would use taxes to pay for even late-term abortions up to the ninth month of pregnancy. (*Campaign Position Paper*)

If you want to help the conservative Republican movement, please send a donation to The Forum, P.O. Box 6689, Louisville, KY 40206. If you would like additional copies of *The Loyal Republican* call 426-1599.

(D.C. 426-1599 082)

The Local Republican

MAY, 1994 PRIMARY EDITION

Gloria Steinem, major Democratic Party contributor, gave \$3,000 to Stokes campaign

Feminist leader Gloria Steinem was a major contributor to Susan Stokes' campaign in the last election. At the same time she contributed \$12,000 to the Democratic party.

For Republicans, the questions raised by those contributions (plus contributions by the National Women's Political Caucus to both Stokes and Democrat Delores Delahanty) are many:

- Why would a fervent Clinton supporter, liberal, and, as noted, contributor to the Democratic party single out Stokes for support? Is there more common ground between Stokes and Steinem than a belief in abortion on demand and taxpayer-funded abortions?
- Can Stokes, endorsed and supported by someone like Steinem, be that much different from any liberal the Democrats are likely to nominate to run against her?
- Can Stokes be counted on to oppose in Congress the agenda of the Clinton administration when she is in agreement with most of its positions?
- In a Congressional district where Democrats outnumber Republicans 3-to-1, does a liberal like

"Asked if abortion was the only issue of concern in the Stokes-Mazzoli race, Stokes said, 'No, and we'll talk about that later.'"

The Courier-Journal



FREEDOM'S HERITAGE FORUM
P.O. BOX 6689
LOUISVILLE, KY 40206

8/11/87

Paid for by Freedom's Heritage Forum, Art Caminhara, Treasurer
P.O. Box 6689, Louisville, KY 40206

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61430277082

As disturbing as anything are the unnamed issues that warranted Steinem's support, but which were never elaborated on following a meeting here in Louisville between Stokes and Steinem. A visibly shaken Stokes, when asked if abortion was the only issue in her race said, "No, and we'll talk about that later." She then, according to the account in *The Courier Journal*, "tried to pull Steinem away," but Steinem offered to the media the opinion that abortion "is not an issue. It's a fundamental right, like freedom of speech."

Steinem has demonstrated on numerous occasions radical opposition to conservative positions and values. At the International Women's Year Conference in Houston, Texas, Steinem said, "for the sake of those who wish to live in equal partnership, we have to abolish and reform the institution of legal marriage." Also, in the *Saturday Review of Education* she was cited as saying, "by the year 2000 we will, I hope, have our children to believe in human potential, not God."

Steinem at Stokes' meeting
Activists says is humble and...

A Not
Activists says is humble an

Susan Stokes and Gloria Steinem following a meeting here in Louisville.

Conservative candidate Hardy: the "real" Republican



"Jefferson County deserves the right to vote between a conservative Republican and a liberal Democrat for the 3rd Congressional District this November."

Hardy campaign literature

Susan Stokes, according to Tim Hardy, her conservative Republican primary opponent for Congress, is a "mirror image of Hillary Clinton" (*The Courier-Journal*, April 28, 1994).

His comment addresses the fact that Stokes favors gays in the military, restrictive gun legislation and NAFTA. Also, on the abortion issue, she favors taxpayer funding of abortion and is against parental notification by minors seeking an abortion. All of these positions are taken by the Clinton administration.

The same article in the *Courier* noted that Stokes "is playing defense on issues such as abortion, guns and homosexuality." Also, the article added, "in a Republican primary, with a much lower turnout, and a more conservative electorate, (abortion) cuts against her."

Hardy is a pro-life Catholic conservative who stands to garner votes from Democrat conservatives in the November general election. It should be noted that the margin of Stokes' defeat in the last Congressional election was attributed to the pro-life vote in the heavily Catholic 3rd Congressional district.

KENTUCKY'S GAY AND LESBIAN NEWSPAPER

The Letter

L 5, NO. 57 May 1994

28044203421

The Letter urges all gay and lesbian Republicans to cast their votes for stokes on May 24.

Paid for by Freedom's Heritage Forum, Art Ceminara, Treasurer
P.O. Box 6689, Louisville, KY 40206

FREEDOM'S HERITAGE FORUM
BOX 6689
LOUISVILLE, KY 40206

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LOUISVILLE, KY

EXPLANATION OF BALLOT

The Forum follows carefully established criteria in its selection process. Voting record, position on issues, leadership in the Pro-Family Movement, and credibility are all considered. As much as possible, we support candidates that are Pro-Life, against pornography, uphold the traditional family (those related by blood, marriage or adoption), and are for limited constitutional government with low taxes. Selections are based on the recommendation of a panel of respected community leaders.

This sample ballot lists all of the candidates. However, when you go to vote, your ballot will NOT have all of these candidates. Only the candidates who are running in your district will be on your ballot.

NOTES

- ① We can not make an endorsement in this race. There are, however, three Pro-Life Candidates: Bill Wilson, Raymond Abbott, and Shelby Lanier.
- ② Dan Seum has a long history of voting for Family Values as a State Representative and as a State Senator. He is an outstanding leader.
- ③ Both of these candidates support Special Rights for Homosexual Behavior.
- ④ Frank Stanley is opposed to giving Special Rights for Homosexual Behavior, he supports the Sanctity of Life, he is opposed to more taxes, he Supports Student Initiated Voluntary School Prayer and opposes condom distribution in public schools.
- ⑤ Tim Hardy is opposed to giving Special Rights for Homosexual Behavior, he supports the Sanctity of Life, he is opposed to more taxes, he supports Student Initiated Voluntary School Prayer, and opposes condom distribution in public schools.

Stokes was the only state legislator from Kentucky to sign the extreme FOCA bill which called for tax payer funding of abortion on demand, even late term abortions. She also supports Gays in the Military (Courier, 4/28/94). She has received large donations from extreme feminist organizations which generally only donate to Democrats.

- ⑥ Julie Rose is for less taxes, she supports Student Initiated Voluntary School Prayer, and opposes condom distribution in public schools. Mercke did not respond on these issues.

FREEDOM'S HERITAGE FORUM
P.O. Box 6689
Louisville, KY 40207

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*Please send a contribution to
We need YOUR help.
Thank Jim*

21644
Gloria Caudler


G-138

Louisville KY 40206

28044203422

THE PRO-FAMILY SAMPLE BALLOT

Please TAKE THIS SAMPLE BALLOT TO THE POLLS AND VOTE ON TUESDAY, MAY 24, BETWEEN 6 A.M. & 6 P.M.



DEMOCRATIC PARTY
3rd Cong Dist. Primary Election - May 24, 1994
Official Ballot Card - Jefferson County, KY
Mark this box ☒ YES ☐ NO
TO VOTE COMPLETE THE ABOVE

United States
Representative in Congress
3rd Congressional District

Vote for One

Raymond ABBOTT	←
Shelby LAMIER JR.	←
Linda JONES	←
Bar Wilson	←
Dick FENZEL	←
Burrell Charles FARMLEY	←
Mike WARD	←
Gerry ELLIS	←
David E BLANK	←
Charles L OWEN	←
Barbara GREGG	←
Deborah S DELAMANTY	←

State Senator
30th Senatorial District

Vote for One

Don "Malone" SEUM	←
Virginia L WOODWARD	←

State Representative
34th Representative District

Vote for One


Mary Lou MARZIAN	←
Ken HERNDON	←

State Representative
44th Representative District

Vote for One

Jon L JENKINS	←
Boo "Buster" LAMPTON	←
Frank STANLEY	←

END OF BALLOT



REPUBLICAN PARTY
3rd Cong Dist. Primary Election - May 24, 1994
Official Ballot Card - Jefferson County, KY
Mark this box ☐ YES ☒ NO
TO VOTE COMPLETE THE ABOVE

United States
Representative in Congress
3rd Congressional District

Vote for One

Tommy KLEIN	←
Tim HARDY	←
Susan B STOKES	←

State Senator
30th Senatorial District

Vote for One

Julia Carmen ROSE	←
Fash MERCKE	←

END OF BALLOT

FREEDOM'S HERITAGE FORUM
P.O. BOX 6689
LOUISVILLE, KY 40206

895-6263

May 16, 1994

Something **MUST** be done **TODAY** or else Susan Stokes and the Child Killers will win The Republican Primary!

Stokes is just another Hillary Clinton.

Is that what we want for our Congressman? More Child Killers running our country and making our laws? Free abortions on demand for everyone and you and I must pay for all of them through higher taxes?

HERE IS WHAT WE NEED TO DO:

1) If you can make 10 or more phone calls in the next 10 days, put your phone number here: _____ and send this entire letter, including the label, to me **TODAY** and we will give you the names of frequently voting Republicans who live in your neighborhood to call and tell you what to say to them. We must hear from you **TODAY** or else it will be too late.

2) We need volunteers to come to the office one day a week and answer the phone and send out lists. If you can do this, put your phone number here _____ and send me this entire letter, including the label. We must hear from you **TODAY**.

3) Send a donation to pay for the literature we are sending to frequently voting Republicans. We are printing 40,000 Tabloids. 25,000 will be mailed out to frequently voting Republicans and 15,000 will be handed out. The cost is over \$6,000. A portion of the tabloid is printed on the back of this letter. We **SIMPLY CAN NOT AFFORD TO SEND YOU A SAMPLE BALLOT UNLESS WE GET AT LEAST A \$1.00 DONATION**. Please make your check out to "The Forum" and send it **TODAY** to P.O. Box 6689, Louisville, KY 40206. Send this entire letter including the label.

Who will help me? Can I call 25,000 Republicans and ask them to vote for Tim Hardy? Can I answer the phone 12 hrs. a day, 7 days a week? Can I print up 40,000 tabloids and distribute them by myself?

Will you help me, please?

Frank Simon

28044203424

WHO'S THE REAL REPUBLICAN?

ISSUE	HARDY	STOKES	CLINTON
Gays in the Military	AGAINST*	FOR**	FOR
Gov't-Controlled Health Care	AGAINST*	FOR**	FOR
NAFTA	AGAINST*	FOR**	FOR
Restrictive Gun Control Legislation	AGAINST*	FOR**	FOR
Taxpayer-Funded Abortion	AGAINST*	FOR**	FOR
Parental Notification for Abortion for minors	AGAINST*	FOR**	FOR

GAYS IN THE MILITARY

- *Hardy -- Is "strongly opposed to the Clinton administration's policy regarding gays in the military and would fight to uphold the Uniform Code of Military Justice which clearly prohibits sexual deviation of this nature." (*Campaign Position Paper*)
- **Stokes-- They (gays) should be allowed. (*The Courier-Journal*, April 28, 1994)

GOVERNMENT-CONTROLLED HEALTH CARE

- *Hardy-- "Will work for the defeat of the proposed Clinton Health Care Plan in an effort to protect small business." (*Campaign Position Paper*)
- **Stokes-- Voted for legislation requiring hospitals to charge the same amount for all patients, prohibiting discounts for volume. (*The Courier-Journal*, March 20, 1990) Sponsored a Health Information Act -- set up government commission to gather and distribute information on hospital charges and quality of care. This act put a business-health coalition on hold. (*The Courier-Journal* May 12, 1991)

NAFTA

- *Hardy-- Opposed. (*Campaign Position Paper*)
- **Stokes-- Favored. (*The Courier-Journal*, November 2, 1992)

RESTRICTIVE GUN CONTROL LEGISLATION

- *Hardy-- We don't have a gun control problem in this nation today. What we have is a crime control problem, and taking the firearms out of the hands of our law-abiding citizens will in no way even scratch the surface of the crime issue at hand. (*Campaign Position Paper*)
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TAXPAYER-FUNDED ABORTION/PARENTAL NOTIFICATION FOR ABORTION FOR MINORS

- *Hardy-- Pro-life. (*Campaign Position Paper*)
- **Stokes-- Voted against informed consent, voted against parental or judicial consent for girls under 18, and voted against the licensing of abortion facilities. (*Record as state legislator*) Supports the Freedom of Choice Act which would use taxes to pay for abortions. (*Campaign Position Paper*)

FREEDOM'S HERITAGE FORUM

P.O. Box 6689

Louisville, KY 40206

FORWARDING ADDRESS REQUESTED

*Will you help me?
Frank Simon*

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G-138

Louisville KY 40206

28044203425

28044203426

EXHIBIT D

895-6263

FREEDOM'S HERITAGE FORUM
P.O. Box 6689
Louisville, KY 40206

July 1, 1994

Federal Election Commission
999 E Street NW
Washington, D.C. 20463


Dear Commissioners:

This report covers the time period from the date we filed our Statement of Organization on February 23, 1994 through June 30, 1994. It is the only report we have made this year, but should be considered our second quarter report. We did not file a report at the end of March because there was almost nothing to report.

From conversation with one of the telephone answering people at the Election Commission office recently, we now understand that quarterly reports should be made whether or not there is much activity, and we will do so in the future.

We appreciate the helpful attitudes and information of those we have talked with by phone when we have called the office. Please commend them for us.

Sincerely,


Frank G. Simon, M.D.

28044203427

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

OR
TYPE OR PRINT

1. NAME OF COMMITTEE (In full) C00290304 053094 ARTHUR C. CERMINARA FREEDOM'S HERITAGE FORUM PO BOX 6689 LOUISVILLE KY 40206	2. FEC IDENTIFICATION NUMBER C00290304 3. <input type="checkbox"/> This committee has qualified as a multicandidate committee. (see FEC FORM 1M)
--	--

4. TYPE OF REPORT

(a) ☐ April 15 Quarterly Report

☒ July 15 Quarterly Report

☐ October 15 Quarterly Report

☐ January 31 Year End Report

☐ July 31 Mid Year Report (Non-election Year Only)

☐ Termination Report

Monthly Report Due On:

<input type="checkbox"/> February 20	<input type="checkbox"/> June 20	<input type="checkbox"/> October 20
<input type="checkbox"/> March 20	<input type="checkbox"/> July 20	<input type="checkbox"/> November 20
<input type="checkbox"/> April 20	<input type="checkbox"/> August 20	<input type="checkbox"/> December 20
<input type="checkbox"/> May 20	<input type="checkbox"/> September 20	<input type="checkbox"/> January 31

☐ Twelfth day report preceding _____
(Type of Election)
election on _____ in the State of _____

☐ Thirtieth day report following the General Election on _____
in the State of _____

(b) Is this Report an Amendment? ☐ YES ☒ NO

SUMMARY	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period <u>2/23/94</u> through <u>6/30/94</u>		
6. (a) Cash on Hand January 1, 19__		\$ <u>— 0 —</u>
(b) Cash on Hand at Beginning of Reporting Period	\$ <u>18,552.02</u>	
(c) Total Receipts (from Line 19)	\$ <u>12,927.00</u>	\$
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ <u>31,479.02</u>	\$
7. Total Disbursements (from Line 30)	\$ <u>27,740.16</u>	\$
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) ...	\$ <u>3,738.86</u>	\$
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	\$ <u>0.00</u>	For further information contact: Federal Election Commission 999 E Street, NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-219-3420
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	\$ <u>0.00</u>	

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer <u>ARTHUR C. CERMINARA</u>	Date <u>4 July 94</u>
Signature of Treasurer <u>Arthur C. Cermicara</u>	

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

--	--	--	--	--	--	--	--	--	--

FEC FORM 3X
(revised 9/93)

28044203428

DETAILED SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

PAGE 2, FEC FORM 3X

(revised 1/1/91)

NAME OF COMMITTEE **FREEDOM'S HERITAGE FORUM**

REPORT COVERING PERIOD
FROM **2/23/94** TO: **6/30/94**

	COLUMN A Total This Period	COLUMN B Calendar Year
I. Receipts		
11. Contributions (other than loans) From:		
a. Individual/Persons Other Than Political Committees		
i. Itemized (use Schedule A)	12,927.00	12,927.00
ii. Unitemized	12,927.00	12,927.00
iii. Total (add i and ii) >	12,927.00	12,927.00
b. Political Party Committees	—	—
c. Other Political Committees (such as PACs)	—	—
d. Total Contributions (add a ii, b and c) >	12,927.00	12,927.00
12. Transfers From Affiliated/Other Party Committees	—	—
13. All Loans Received	—	—
14. Loan Repayments Received	—	—
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)	—	—
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees	—	—
17. Other Federal Receipts (Dividends, Interest, etc.)	—	—
18. Transfers from Nonfederal Account for Joint Activity	—	—
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >	12,927.00	12,927.00
20. Total Federal Receipts (subtract line 18 from line 19) >	12,927.00	12,927.00
II. Disbursements		
21. Operating Expenditures:		
a. Shared Federal/Non-Federal Activity (from Schedule H4)		
i. Federal Share	—	—
ii. Non-Federal Share	—	—
b. Other Federal Operating Expenditures	4,951.35	4,951.35
c. Total Operating Expenditures (add a i, a ii, and b) >	4,951.35	4,951.35
22. Transfers to Affiliated/Other Party Committees	—	—
23. Contributions to Federal Candidates/Committees and Other Political Committees	—	—
24. Independent Expenditures (use Schedule E)	22,788.81	22,788.81
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F) ..	—	—
26. Loan Repayments Made	—	—
27. Loans Made	—	—
28. Refunds of Contributions To:		
a. Individuals/Persons Other Than Political Committees	—	—
b. Political Party Committees	—	—
c. Other Political Committees (such as PACs)	—	—
d. Total Contribution Refunds (add a, b and c) >	0.00	0.00
29. Other Disbursements	—	—
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	27,740.16	27,740.16
31. Total Federal Disbursements (subtract line 21 a ii from line 30) >	27,740.16	27,740.16
III. Net Contributions/Operating Expenditures		
32. Total Contributions (other than loans)(from line 11d)		
33. Total Contribution Refunds (from line 28d)		
34. Net Contributions (other than loans)(subtract line 33 from 32)		
35. Total Federal Operating Expenditures (add 21 a i and 21 b) >		
36. Offsets to Operating Expenditures (from line 15)		
37. Net Operating Expenditures (subtract line 36 from 35) >		

28044203429

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 1 OF 2
FOR LINE NUMBER

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (in Full)

> FREEDOM'S HERITAGE FORUM

A. Full Name, Mailing Address and ZIP Code LOUISVILLE LETTER SERVICE 4701 PINWOOD RD. LOUISVILLE, KY 40218	Purpose of Disbursement MAILING-FUND RAISER Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 3/11/94	Amount of Each Disbursement This Period 652.36
B. Full Name, Mailing Address and ZIP Code JEFFERSON COUNTY TREASURER JEFFERSON COUNTY BOARD OF ELECTIONS 210 BARRET AVE LOUISVILLE, KY 40204	Purpose of Disbursement JEFFERSON COUNTY STREET BOOK Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 4/1/94	Amount of Each Disbursement This Period 500.00
C. Full Name, Mailing Address and ZIP Code KY. REGISTRY OF ELECTION FINANCE 140 WALNUT STREET FRANKFORT, KY 40601-3240	Purpose of Disbursement REGISTRATION FEE Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 4/4/94	Amount of Each Disbursement This Period 200.00
D. Full Name, Mailing Address and ZIP Code KY REGISTRY OF ELECTION FINANCE 140 WALNUT STREET FRANKFORT, KY 40601-3240	Purpose of Disbursement ADMINISTRATION FEE Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 4/4/94	Amount of Each Disbursement This Period 32.61
E. Full Name, Mailing Address and ZIP Code OFFICE DEPOT 1001 BRECKINRIDGE LN. LOUISVILLE, KY 40207	Purpose of Disbursement COPY PAPER Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 4/9/94	Amount of Each Disbursement This Period 29.38
F. Full Name, Mailing Address and ZIP Code LOUISVILLE LETTER SERVICE 4701 PINWOOD RD LOUISVILLE, KY 40218	Purpose of Disbursement MAILING FOR REPUBLICAN CONVENTION Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 4/11/94	Amount of Each Disbursement This Period 2,300.00
G. Full Name, Mailing Address and ZIP Code STATE OF KENTUCKY LEGISLATIVE RESEARCH COMMISSION CAPITOL BUILDING FRANKFORT, KY 40601	Purpose of Disbursement TWO RESEARCHING MAPS Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 4/13/94	Amount of Each Disbursement This Period 9.00
H. Full Name, Mailing Address and ZIP Code MARY BRUGGER LOUISVILLE, KY 40219	Purpose of Disbursement FOOD FOR VOLUNTEER APPRECIATION BANQUET Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 4/18/94	Amount of Each Disbursement This Period 450.00
I. Full Name, Mailing Address and ZIP Code F.O.P. LODGE #25 (SHERIFF'S LODGE) 719 LYNN ST. LOUISVILLE, KY 40217	Purpose of Disbursement RENTAL, SNACK HALL FOR APPRECIATION BANQUET Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 4/20/94	Amount of Each Disbursement This Period 327.00

SUBTOTAL of Disbursements This Page (optional)

4,037.35

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 2 OF 2
FOR LINE NUMBER

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

FREEDOM'S HERITAGE FORUM

A. Full Name, Mailing Address and ZIP Code DEBBIE LIMBAUGH LOUISVILLE, KY 40241	Purpose of Disbursement CLERICAL WORK Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 5/27/94	Amount of Each Disbursement This Period \$ 135.00
B. Full Name, Mailing Address and ZIP Code POSTMASTER US POSTAL SERVICE 1420 SHALINGER LN. LOUISVILLE, KY 40213	Purpose of Disbursement POSTAGE DUE ACCOUNT ADDRESS CHANGE RETURN Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 6/1/94	Amount of Each Disbursement This Period 200.00
C. Full Name, Mailing Address and ZIP Code AMERICAN COACH TRAVEL, INC. P.O. BOX 1262 NEW ALBANY, IN 47151-1262	Purpose of Disbursement CHARTER BUS, LEXINGTON, STATE REPAIR HARRY CAMP Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 6/4/94	Amount of Each Disbursement This Period 380.00
D. Full Name, Mailing Address and ZIP Code KY STATE BOARD OF ELECTIONS 140 WALNUT ST. FRANKFORT, KY 40601-3240	Purpose of Disbursement ADDRESS LABELS, REK- TERED INDEPENDENT Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 6/7/94	Amount of Each Disbursement This Period 199.00
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)

914.00

TOTAL This Period (last page this line number only)

4,951.35

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ITEMIZED INDEPENDENT EXPENDITURES

Page 1 of 2 Pages

(See Reverse Side for Instructions)

Name of Committee (in Full)					
Fus Name, Mailing Address & ZIP Code of Each Payee		Purpose of Expenditure	Date (month, day, year)	Amount	Name of Federal Candidate supported or opposed by the expenditure & office sought
KEN SNYDER ADVERTISING, INC. 2442 TYLER LN. LOUISVILLE, KY 40205		CONSULTATION AND LAYOUT OF TABLOIDS	5/4/94	\$1,000.00	TIM HARDY, SUPPORT SUSAN STOKES, OPPOSE KY-3RD CONGRESS. DISTRICT <input type="checkbox"/> Support <input type="checkbox"/> Oppose
LOUISVILLE LETTER SERVICE 4701 PINEWOOD RD. LOUISVILLE, KY 40218		FOLDING, STUFFING AND MAILING	5/10/94	2,500.00	TIM HARDY, SUPPORT SUSAN STOKES, OPPOSE KY-3RD CONGRESS. DISTRICT <input type="checkbox"/> Support <input type="checkbox"/> Oppose
LOUISVILLE LETTER SERVICE 4701 PINEWOOD RD. LOUISVILLE, KY 40218		PRINTING, FOLDING, STUFFING, MAILING APPEAL LETTERS	5/11/94	1,400.00	TIM HARDY, SUPPORT SUSAN STOKES, OPPOSE KY-3RD CONGRESS. DISTRICT <input type="checkbox"/> Support <input type="checkbox"/> Oppose
LOUISVILLE LETTER SERVICE 4701 PINEWOOD RD. LOUISVILLE, KY 40218		PRINTING, FOLDING, STUFFING, MAILING PRO-LIFE LETTERS	5/11/94	1,353.83	TIM HARDY, SUPPORT SUSAN STOKES, OPPOSE KY-3RD CONGRESS. DISTRICT <input type="checkbox"/> Support <input type="checkbox"/> Oppose
LOUISVILLE LETTER SERVICE 4701 PINEWOOD RD. LOUISVILLE, KY 40218		PRINTING, STUFFING, MAILING LETTERS	5/11/94	1,670.51	TIM HARDY / SUSAN STOKES RON LEWIS / JOE FRATHER 3RD & 2ND CONGRESS. DISTRICTS <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
LOUISVILLE LETTER SERVICE 4701 PINEWOOD RD. LOUISVILLE, KY 40218		PRINTING, STUFFING, MAILING PRO-LIFE CANDIDATE ROSTER	5/17/94	750.00	TIM HARDY / SUSAN STOKES RON LEWIS / JOE FRATHER 3RD & 2ND CONGRESS. DISTRICTS <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
(a) SUBTOTAL of Itemized Independent Expenditures				\$ 3,674.34	
(b) SUBTOTAL of Unitemized Independent Expenditures (Non-federal)				\$ 2,070.06	
(c) TOTAL Independent Expenditures					\$ See page 2

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, concert with, or at the request or suggestion of any candidate or any authorized committee or agent of such candidate or authorized committee. Furthermore, these expenditures did not involve the financing of dissemination, distribution, or republication in whole or in part of any campaign materials prepared by the candidate, his campaign committee, or their agent.

Subscribed and sworn to before me this _____ day of _____, 19____

My Commission expires: _____

NOTARY PUBLIC

Signature

Date

ITEMIZED INDEPENDENT EXPENDITURES

Page 2 of 2 Pages

(See Reverse Side for Instructions)

Name of Committee (in Full)				
FREEDOM'S HERITAGE FORUM				
Full Name, Mailing Address & ZIP Code of Each Payee	Purpose of Expenditure	Date (month, day, year)	Amount	Name of Federal Candidate supported or opposed by the expenditure & office sought
KINKO'S COPIES 4121 SHELBYVILLE RD. LOUISVILLE, KY 40207	30,000 COPIES "THE LETTER" HEADLINE AND TEXT	5/20/94	\$ 1,116.71	SUSAN STOKES 3RD CONGRESS. DISTRICT <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
LOUISVILLE LETTER SERVICE 4701 PINWOOD RD. LOUISVILLE, KY 40218	FOLDING, ADDRESSING & MAILING 30,000 COPIES	5/20/94	\$ 2,400.00	SUSAN STOKES 3RD CONGRESS. DISTRICT <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
PUBLISHERS PRINTING CO., INC. P.O. BOX 37500 LOUISVILLE, KY 40233	PRINTING 40,000 BROCHURES	5/31/94	\$ 2,400.00	TIM HARDY, SUPPORT SUSAN STOKES, OPPOSE 3RD CONGRESS. DISTRICT <input type="checkbox"/> Support <input type="checkbox"/> Oppose
LOUISVILLE LETTER SERVICE 4701 PINWOOD RD. LOUISVILLE, KY 40218	LETTERS, Fliers, TABLOIDS, ENVELOPES, SAMPLE BALLOTS, MAILINGS	6/9/94	\$ 5,081.65	SUPPORT FOR PRO-LIFE CANDIDATES TIM HARDY, RON LEWIS 3RD & 2ND CONGRESS. DISTRICTS <input type="checkbox"/> Support <input type="checkbox"/> Oppose
DEBBIE COOPER SHEPHERDSVILLE, KY 40165	1500 COPIES - BULLITT COUNTY VOTER GUIDE	6/9/94	\$ 50.00	RON LEWIS, SUPPORT JOE PRATHER, OPPOSE 2ND CONGRESS. DISTRICT <input type="checkbox"/> Support <input type="checkbox"/> Oppose
				<input type="checkbox"/> Support <input type="checkbox"/> Oppose
(a) SUBTOTAL of Itemized Independent Expenditures			\$ 11,078.36	
(b) SUBTOTAL of Unitemized Independent Expenditures (None Reported)			\$ 976.05	
(c) TOTAL Independent Expenditures			\$ 22,788.81	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, concert with, or at the request or suggestion of any candidate or any authorized committee or agent of such candidate or authorized committee. Furthermore, these expenditures did not involve the financing of dissemination, distribution, or republication in whole or in part of any campaign materials prepared by the candidate, his campaign committee, or their agent.

Subscribed and sworn to before me this _____ day of _____, 19____

My Commission expires: _____

NOTARY PUBLIC

Signature _____

Date _____

28044203433

SENT BY:KREF

: 7-12-94 : 2:35PM :

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KREF 94006P

KENTUCKY REGISTRY OF ELECTION FINANCE
140 WALNUT STREET
FRANKFORT, KENTUCKY 40601
(502) 573-2228
FAX # (502) 573-3622



1. PAC Name Freedom's Heritage Forum
PAC Acronym (if applicable)

2. Ky. Registration Number 00144
(Account Number)

Jul 5 2 21 PM '94

OFFICE USE ONLY

PAGE 0002

PERMANENT COMMITTEE (PAC) ELECTION FINANCE STATEMENT COVER PAGE

3. Committee Mailing Address
PO Box 6689
Louisville, Ky. 40206
Area code/Phone No. 502/895-6263

4. Treasurer's Name and Mailing Address
Art Cernikara
PO Box 6689
Louisville, Ky. 40206
Area code/Phone No. 502/895-6263

5. This Statement Covers
From April 1 '94.
To June 30 '94.
Month Day Year

TYPE OF STATEMENT

- a. ☒ Quarterly
☐ Amendment
☐ Termination

7. Verification: I certify that this Election Finance Statement is prepared with all reasonable diligence and to the best of my knowledge the contents are true, accurate and complete.

Chairman
Treasurer

Frank C. Simon
Type or Print Name

[Signature]
Authorized Signature

Date 7/1/94
Month Day Year

NOTE: USE ONLY THOSE PAGES WITH
APPLY TO YOUR PAC.

If you have had no activity between report periods, complete Cover Page and Summary Page. Enter 0 in receipts, enter 0 in expenditures and ending balance from last report.

94

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SENT BY:KREF

7-12-94 : 2:55PM :

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SUMMARY PAGE

Committee Name Freedom's Heritage Forum Period From April 1, 1994 to June 30, 1994

RECEIPTS

COLUMN I
THIS
PERIODCOLUMN II
CUMULATIVE
THIS YEAR

1. CONTRIBUTIONS: (Including all receipts from Fundraisers)

- a. Itemized by check or written instrument (Schedule 1, Item 7a)
 b. Other receipts (Schedule 1, Item 7b)
 c. Receipts in currency (Number of people (135 people)
 (Individual cash contribution limit is \$50)
 d. Anonymous (maximum \$50 per contributor)
 e. Unitemized contributions (Number of people 502)
 (Contributions by check of \$100 or less)

\$ -0-
 +\$ -0-
 +\$ 1,131.-
 +\$ -0-
 +\$ 10,007.-

\$
 (\$1,000 max.
 per election)

2. TOTAL RECEIPTS

\$ 11,141.-

\$

DISBURSEMENTS

3. TOTAL DISBURSEMENT (Schedule 2)

- a. Disbursements not subject to 5% (Schedule 2, Item 7a)
 b. Disbursements subject to 5% (Schedule 2, Item 7b)
 c. Line 3b x 5% fee - (after fee is calculated add line 3a, 3b,
 and 3c for total disbursements)

\$ 19,248.32
 +\$ 7,437.98
 +\$ 361.47

TOTAL DISBURSEMENT

\$ 27,047.80

\$

BALANCE STATEMENT

4. Ending balance of last report (Enter -0- if no previous report)
 5. Amount received during reporting period (Line 2, column I)
 6. Sub-Total (Add lines 4 and 5)
 7. Amount disbursed during reporting period (Line 3, column I)
 8. ENDING BALANCE (Subtract Line 7 from Line 6)

\$ 19,685.46
 +\$ 11,141.-
 -\$ 30,826.46
 -\$ 27,047.80
 = \$ 3,738.86

9. Unpaid Bills or Other Obligations owed BY: (Schedule 5, Item 11)
 10. Debts and Obligations owed TO: (Schedule 5, Item 11)

\$
 \$

11. In-Kind Contributions Received (Schedule 3, Item 7)

\$

THIS
PERIODCUMULATIVE
THIS YEAR

JUL 12 '94 14:56

PAGE.003

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SENT BY:KREF

: 7-12-94 : 2:36PM :

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5025403023:4

RETURN RECEIPT OF ELECTRONIC

100 VANDERBILT STREET
FARMINGTON, CONNECTICUT 06031ISSN 572-8224
FAX 860 673-4623

RECEIVED RECEIPTS

SCHEDULE 1

1. Name of Committee
*Freedom's Halfway Home*2. KY Registration Number
(Account Number)
*00114*3. This Statement Covers
From *4* *1* *94*
To *6* *30* *94*4. Occupation and Employer of
Contributor and Spouse of Contributor
if not employed, state other status and
business. Occupation shall be specified
OR Major Business, social or political
interest represented by committee

4a. Name and Address from whom received. Receipts in excess of \$100 must be itemized. All PAC receipts regardless of amount must be itemized.	4b. Receipt Status	5. Type of contribution or other receipt	6. Date of Receipt	AMOUNT		8. Cumulative for year (Per Contributor)	9. Occupation and Employer of Contributor and Spouse of Contributor if not employed, state other status and business. Occupation shall be specified OR Major Business, social or political interest represented by committee
				7a. Contributions by Check or other instrument	7b. Other Receipts		
		Contributions: <input type="checkbox"/> Direct from a person or authorized entity <input type="checkbox"/> Fundraiser <input type="checkbox"/> Item (Specify) _____ <input type="checkbox"/> Transfer of Funds from Affiliated Committee					
		Contributions: <input type="checkbox"/> Direct from a person or authorized entity <input type="checkbox"/> Fundraiser <input type="checkbox"/> Item (Specify) _____ <input type="checkbox"/> Transfer of Funds from Affiliated Committee					
		Contributions: <input type="checkbox"/> Direct from a person or authorized entity <input type="checkbox"/> Fundraiser <input type="checkbox"/> Item (Specify) _____ <input type="checkbox"/> Transfer of Funds from Affiliated Committee					
		Contributions: <input type="checkbox"/> Direct from a person or authorized entity <input type="checkbox"/> Fundraiser <input type="checkbox"/> Item (Specify) _____ <input type="checkbox"/> Transfer of Funds from Affiliated Committee					
		Contributions: <input type="checkbox"/> Direct from a person or authorized entity <input type="checkbox"/> Fundraiser <input type="checkbox"/> Item (Specify) _____ <input type="checkbox"/> Transfer of Funds from Affiliated Committee					
		Contributions: <input type="checkbox"/> Direct from a person or authorized entity <input type="checkbox"/> Fundraiser <input type="checkbox"/> Item (Specify) _____ <input type="checkbox"/> Transfer of Funds from Affiliated Committee					
		Contributions: <input type="checkbox"/> Direct from a person or authorized entity <input type="checkbox"/> Fundraiser <input type="checkbox"/> Item (Specify) _____ <input type="checkbox"/> Transfer of Funds from Affiliated Committee					

Total This Period (only on last page of this Schedule)

Submit This Page

Enter the total of the last Summary Page	Submit the total on the Summary Page
0000	0000

KENTUCKY REGISTRY OF ELECTION FINANCE

400 WILMOT STREET
FRANKFORT, KENTUCKY 40601
PH (502) 573-2225
FAX (502) 573-2222

DISBURSEMENTS

SCHEDULE 2

4. Name, Address and Occupation of person to whom paid (if over \$25.00, disbursement must be made by check)	5. Purpose (Be specific \$ 25.00 or less show purpose, date and amount. Beneficiary of expenditure, if other than POC, must be listed)	6. Date	7a. Amount Disbursed (file subject to 5% Administrative Fee.)	7b. Amount Disbursed (file subject to 5% Admin. Fee.)
Jefferson County Treasurer Jefferson County Board of E. Comm. 800 Barrat Ave. 40204 Louisville, Ky.	Jefferson County sheet book	4/1/94		35.-
Kentucky Registry of Election Finance 140 Walnut St. Frankfort, Ky. 40601-3240	Registration fee	4/4/94		200.-
"	5% of expenditures (administrative fee)		32.61	
Office Deposit 1001 Breckinridge Ln Louisville, Ky. 40207	Copy paper	4/9/94		29.38
Louisville Letter Service 4701 Pinewood Rd Louisville, Ky. 40218	Mailing	4/11/94		2,300.-
Legislative Research Commission Capitol Building Frankfort, Ky. 40601	Two redistributed maps	4/10/94		9.-
Mary Grainger Louisville, Ky. 40219	Food for Volunteer Appreciation Banquet			450.-

Submit This Page

Refer This Period (only on last page of this Schedule)

From 4/1/94	To 4/30/94
Sum of 4	Sum of 4

Enter the total on line 2a of Summary Page

Enter the total on line 2b of Summary Page

5025408023;# 5

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7-12-94 : 2:37PM :

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JUL-12-94 TUE 03:02 PM K.-L. STENART.ESQ.

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1. 00

SENT BY:KREF

7-12-94 2:37PM

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5025402023:4 0

KENTUCKY MAGISTRY OF ELECTION FINANCE
100 WALNUT STREET
FRANKFORT, KENTUCKY 40601
502 502023
NOT 502023 502022

DISBURSEMENTS
SCHEDULE 2

1. Name of Committee	2. KY Registration Number (Account Number)	3. This Statement Covers From To	4. This Statement Covers To
Freedom's Heritage Forum	00844	From 4/20/94 To 5/17/94	4/20/94 To 5/17/94
4. Name, Address and Occupation of person to whom paid (If over \$25.00, disbursement must be made by check)	5. Purpose (Be specific, \$ 25.00 or less show purpose, date and amount, Beneficiary of expenditure, if other than POC, must be listed)	6. Date	7. Amount Debursed (Not subject to 5% Administrative Fee.)
F.O.F. #25 719 Logan St. Louisville, Ky. 40217	Rental of "Swiss Hall"	4/20/94	329.-
Ken Snyder Advertising 2442 Tyler Ln Louisville, Ky. 40205	Consulting and layout of Tablets for Tim Hardy against Shaks	5/11/94	1,000.- Spent by Fed. POC for Fed. Candidate
Louisville Letter Service 4701 Pinewood Rd Louisville, Ky. 40242	Mailing for Hardy and against Shaks	5/10/94	2,500.- Spent by Fed. POC for Fed. Candidate
"	Mailing	5/11/94	1,400.- Spent by Fed. POC for Fed. Candidate
"	Mailing	5/10/94	2,990.57 Spent by Fed. POC for Fed. Candidate
"	Mailing	5/10/94	1,355.83 Spent by Fed. POC for Fed. Candidate
"	Mailing	5/17/94	1,500.- Spent by Fed. POC for Fed. Candidate

Total This Period (only on last page of this Schedule)

Subtotal This Page

Enter this total
in line 2a of
Summary Page

Enter this
total on line
2a of Summary Page

SENT BY:KREF

7-12-94 : 2:38PM :

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5025403023;# 7

KENTUCKY RESISTANCE OF ELECTION FINANCE

100 WALNUT STREET
FRANKFORT, KENTUCKY 40601
PH 502 623 3333
FAX 502 623 3333

DISBURSEMENTS

SCHEDULE 2

4. Name, Address and Occupation of person to whom paid (if over \$25.00, disbursement must be made by check.)	5. Purpose (Be specific. \$ 25.00 or less show purpose, date and amount. Beneficiary of expenditure, if other than PNC, must be listed)	6. Date	7a. Amount Disbursed (Not subject to 5% Administrative Fee)	7b. Amount Disbursed (subject to 5% Administrative Fee)
1. Name of Committee	2. KY Registration Number (Account Number)	3. This Statement Covers		
Freedom's Heritage Forum	00144	From <u>1</u> <u>1</u> <u>94</u> to <u>1</u> <u>30</u> <u>94</u> Month Day Year		
Kinko's Copies 4121 Shelbyville Rd Louisville, Ky. 40207	Printing (For Hardy against Stokes)	5/20/94	1,116.21 Spent by Ed. PNC for Ed. Candidate	
Louisville Letter Service 4701 Pinewood Rd Louisville, Ky. 40216	Mailing (")	5/20/94	2,140.00 Spent by Ed. PNC for Ed. Candidate	
Oelbich Limbouch Louisville, Ky. 40241	Classical work	5/20/94		135.-
Publishers Printing Co. PO Box 37500 Louisville, Ky. 40233	Printing (")	5/31/94	2,400.00 Spent by Ed. PNC for Ed. Candidate	
Postmaster 1420 Gardiner Ln Louisville, Ky. 40213	Postage Due	6/1/94		200.-
American Coach Travel PO Box 1262 New Albany, IN 47151-1262	Bus to Lexington for Republican State Convention			380.-
State Board of Election 140 Walnut St. Frankfort, Ky. 40601-3240	Labels			199.-

Total This Period (only on last page of this Schedule)

Schedule This Page

500.00	500.00
500.00	500.00

Enter Disbursed
on line 2a of
Summary PageEnter this
total on line
2b of Summary Page

5025403023:# B

REIMBURSEMENTS
SCHEDULE 2[illegible]